## L19000046781

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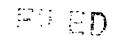
TO: Registration Section Division of Corporations				
SUBJECT: BIOCKYOCK CONSTYUCTION LLC.				
The enclosed Articles of Amendment and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
TIMOTHY HOMES  Name of Person				
BIACKYOCK CONSTYUCTION LLC Firm Company				
810 Bania Del Soi Drive Unit D				
RUSKIN, FL 33570 City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:				
TIMOTHY HOMES at (813) 326-0247  Name of Person Area Code Daytime Telephone Number				
Enclosed is a check for the following amount:				
X S25.00 Filing Fee ☐ S30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee,  Certificate of Status Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)				

Mailing Address: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Blackrock Construc	tion LLC	2021 OCT 22 PH 4: 26	
(Name of the Limited Liability Compar (A Florida Limited L	iapility Company)	<u>(ecords.)</u>	
The Articles of Organization for this Limited Liability Company Florida document number <u>L1900046781</u> .	were filed on <u>02</u> \\8	2019 and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here:		
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation	"LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	na		
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	nja		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>e</u>	nter the name of the new registered	
Name of New Registered Agent:	<u>-</u>		
New Registered Office Address:	Entero Et additional		
	Enter Florida street address		
<del></del>	Cin	, Florida	
No. Do to the state of the state Destate of Asset	- •	C =	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	kimberly Holmes	530 BIMINI BAY BIND	□Add
		Apollo Beach, FL 33572	XRemove
			□Change
			= Add
			ÜRemove
			□Change
			🗀 Add
			□Remove
			□Change
<del></del>			□Add
			□Remove
			= Change
			🗆 Add
			□Remove
			[_]Change
			□ Add
			□ Remove
			TiChange.

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: 10 20 2021 \_ (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Signature of a member or authorized representative of a member

Filing Fee: \$25.00