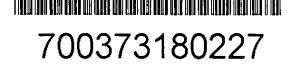
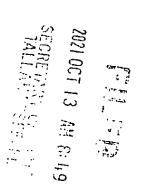
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(Red	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

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COVER LETTER

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Registration Section

TO:

Division of Corpo	orations					
	Jaa 11/5 Mars C					
SUBJECT:	Name of Limi	Con Group UC ited Liability Company				
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.				
Please return all correspond	dence concerning this matter	to the following:				
	James U	Jilli HS Name of Person				
	The W'S Elev	Firm/Company	 .			
	3127 Buck H	Address				
	Orlan	do Floriad 32817 City/State and Zip Code				
		bleamail . Com to be seed for future annual report notific				
For further information cor	ncerning this matter, please ca	all:				
James Willi	itts	at (<u>321</u>) <u>298 - 1</u> Area Code Daytime	1980			
Name of I	'erson	Area Code Daytime	Telephone Number			
Enclosed is a check for the	following amount:					
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
<u>Mailing Address:</u> Registration Se		Street Address: Registration Sect	tion			
Division of Co		Division of Corp				
P.O. Box 6327		The Centre of Tallahassee				
Tallahassee, Fl	_ 32314	2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The W's Elevation (Name of the Limited L. (A.F.	iability Compar lorida Limited L	o LLC ny as it now appears on ou iability Company)	г records.)			
The Articles of Organization for this Limited Liabil Florida document number L19000944 pc	ity Company v	were filed on <u>04/60</u> 0 - 63 - 436 74521	5/2019	a	nd assi	gned
This amendment is submitted to amend the following	ıg:					
A. If amending name, enter the new name of the	e limited liabi	lity company here:				
Willites Services	LLC					
The new name must be distinguishable and contain the words	"Limited Liabili	ty Company," the designati	on "LLC" or the	abbreviat	ion "L.L	C."
Enter new principal offices address, if applicable	2:	3127 BULK H	in PL	:-:C:	2021	
(Principal office address MUST BE A STREET A	DDRESS)	Orlando, FL 33	2817		007	المدي
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.)	<u>v</u>	3127 Buck Hill Orlando Fl 3	1 PL 2817	7 (2) (1) (2) (1) (2) (1) (2) (1) (1)	13 All 6: 19	12 par
B. If amending the registered agent and/or regis		ddress on our records	s, <u>enter the na</u>	me of t	<u>he new</u>	registered
Name of New Registered Agent:	James	Willits				
New Registered Office Address:	347 Buck	Enter Florida stre	u adduse			
		rmer r wraa sire	et aaaress		_	
-	orland	City	, Florida _	31	817	
		Cuy		Zip	Code	

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
			□Add
			□Remove
	 		□Add
			□Remove
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Effective date, if other	ted in this block doe	s not meet the	applicable sta	of filing or more the	(op) han ⁹ 0 days aft quirements, th	tional) er filing.) Purs nis date will	suant to 6 not be li	05.0207 (sted as t
document's effective d			ctive time at	12:01 am on th	o andiocof:	(b) The 90t	h day af	ier the
	ayed effective date, l	but not an effe	ettie time, at	12.01 a.m, on u	ic carner of.			
document's effective d se record specifies a dela ord is filed.								
document's effective d								

Filing Fee: \$25.00