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COVER LETTER

	Registration Sec Division of Corp						
		struction, LLC					
SUBJEC	T:	Name of Limited Liability Company					
		Amendment and fee(s) are submodence concerning this matter					
		Poyton Silver					
			Name of Person				
		Silver's Construction, LLC	:				
			Firm/Company				
		4142 16th Avenue N.E.					
			Address				
		Naples, 5L 34120					
		peytonsil97@gmail.com	City/State and Zip Code				
		E-muil address: (to be used for future annual report notification;				
For furth	ner information o	onceining this matter, please c	a!1·				
Peytons	Silver		239 961-3858				
	Name o	i Person	Area Code Daytime Telephone Number				
Enclosed	d is a check for th	ne fellowing amount:					
□ \$26	.00 Filing Fee		☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				
	Mailing Address Registration	Section	Street Address: Registration Section				
	Division of C P.O. Box 633		Division of Corporations The Centre of Tallahassee				
	Tallahassee,		2415 N. Monroe Street, Suite 810 Taliahassee, FL 32303				

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Silver's Construction, LLC (Name of the Limited Liability Com (A Florida Limite	inany as it now appears on our recorr of Liability Company)	<u>ls.</u>)
The Articles of Organization for this Limited Liability Comparation document number 2.19000096335	ny were filed on 04'08/2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "famited Li-	ability Company," the designation "LLC	E" or the abbreviation "L 1, C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		-6 -
Enter new mailing address, if applicable: (Mulling address MAY BF A POST OFFICE BOX)		SE DE D
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	ce address on our records, <u>ente</u> l	r the name of the new registered
Name of New Registered Ayent:		
New Registered Office Address:	Enter Florida speci addre	1.42
	, F	lorida

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 hubility 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>	Name	Address	Type of Action
AMBR	Peyton Silver	4142 16th Avenue N.E., Naples, FL 34120	<u>≅</u> Add
			□Remove
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			DAdd
			□Remove
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			□Change

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