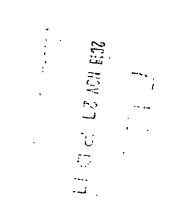
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	(Requestor's Name)
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 069884 170159A

AUTHORIZATION :

COST LIMIT : 15 25.00

ORDER DATE: November 27, 2019

ORDER TIME : 3:12 PM

ORDER NO. : 069884-005

CUSTOMER NO: 170159A

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### DOMESTIC AMENDMENT FILING

NAME: AKIRA WOOD & BUILDING WORKS,

LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER'S INITIALS:

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OF 10% NOVED 12 NOVED

(Name of the Limit	RA WOOD & BUILDING WO ed Liability Company as it now (A Florida Limited Liability Com	ORKS, LLC  appears on our records.)  pany)
The Articles of Organization for this Limited Li Florida document number <u>L19000119052</u>	ability Company were filed o	on 05/01/2019 and assigned
This amendment is submitted to amend the folio	owing:	
A. If amending name, enter the new name of	the limited liability compa	nny here:
AKIRA WOOD, LLC		
The new name must be distinguishable and contain the w	ords "Limited Liability Company,	"the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applies	able:	
(Principal office address MUST BE A STREE		
Enter new malling address, if applicable: (Malling address MAY BE A POST OFFICE I	<u></u>	
B. If amending the registered agent and/or rengent and/or the new registered office addres	egistered office address on a s here:	our records, enter the name of the new register
Name of New Registered Agent:	BRUCE BRASHEAR	
New Registered Office Address:	925 NW 56th TER, SUITE	
11-01-11-01-11-11-11-11-11-11-11-11-11-1	Ento	er Florida street address
	GAINESVILLE	, Florida 32605
	City	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.

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
			Reinove
			□Change
			□Add
			Remove
			Change
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Tective date, if other than the an effective date is listed, the date must ote: If the date inserted in this blooment's effective date on the De	ick does not meet the app	micable statutory till	(optional more than 90 days after filin ng requirements, this dat	) g.) Pursuant to 605.020 e will not be listed a
record specifies a delayed The 90th day after the reco	effective date, but ord is filed.	not an effective	time, at 12:01 a.m	on the earlier o
November 26		·		
•	Signature of a member or ac			
	<u> </u>			

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Filing Fee: \$25.00