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COVER LETTER

Registration Section

TO:

Division of Cor	porations					
OND IN ZUE.		STRUCTION, LLC				
SUBJECT:	Name of Lim	ited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	Alexander B. Cve	reko				
		Name of Person				
	Cvercko & Assoc	iates				
		Firm/Company				
	13500 Sutton Par	k Drive S., Suite 304,	SEC TA	2021 AUS		
		Address				
	Jacksonville, FL	32224				
		City/State and Zip Code	Infication)			
	assistant@cverck		[7:5]	N C		
For further information c	E-mail address: (oncerning this matter, please c	to be used for future annual report not	Infication)	PH 2: 13		
			700			
Alexander B. Cvercko		904 821-87 at ()				
Name o	f Person	Area Code Daytii	me Telephone Number			
Enclosed is a check for the	ne following amount:					
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate o Certified Col tadditional copy	f Status & oy		
Mailing Address		Street Address:	aution			
Registration S Division of C		Registration Section Division of Corporations				
P.O. Box 632		The Centre of				
Tallahassee, i	FL 32314	2415 N. Monro	oe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DAYCO CONSTRUCTION, LL	С				
(Name of the Limited Liability Cor (A Florida Limit	npany as it now app ed Liability Company	ears on our records.) y)			
The Articles of Organization for this Limited Liability Compa Florida document number $\frac{L19000125462}{L19000125462}$	my were filed on .	05/08/2019		and assigned	
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited l	<u>iability company</u>	here:			
DAYCO CONST. & TRANSPORT, LLC					
The new name must be distinguishable and contain the words "Limited Li	iability Company," th	ie designation "LLC" (or the abbrev	iation "L.L.C."	_
Enter new principal offices address, if applicable:	·				
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>		<u>₹</u>	202	
Enter new mailing address, if applicable:				AUG -2 P	٠ مهم مايل د د
(Mailing address MAY BE A POST OFFICE BOX)				3 2: □	<u> </u>
B. If amending the registered agent and/or registered office and/or the new registered office address here:	ce address on ou	r records, <u>enter th</u>	<u>je name of</u>	the new regis	<u>te</u> red
Name of New Registered Agent:					_
New Registered Office Address:	Enter F	Florida street address			_
		Flor	ida		
	City	, 1 101	rida	Zip Code	_
New Registered Agent's Signature, if changing Registered Age	<u>nt:</u>				
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and compl accept the obligations of my position as registered agent of	ete performance	of my duties, and	l Lam fami	iliar with and	

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
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f an effec	We date, if other the ctive date is listed, the fithe date inserted in the cate of the cat	date must be specifi n this block does	ic and cannot be pr not meet the app	licable statutory	g or more than 90 of filing requirem	(optional) days after filing.) ents, this date) Pursuant to 605.0 will not be listed	1207 1 as
			it not an effective	e time, at 12:01	a.m. on the earli	er of: (b) The	e 90th day after	the
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Filing Fee: \$25.00