119000214293

/Pa	questor's Name)	
(//e	questors marrie)	
(Ad	dress)	
(
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Cadillad Casina	Cadificator	and Charles
Certified Copies	_ Certificates	s or Status
		· · · · · · · · · · · · · · · · · · ·
Special Instructions to	Filing Officer:	

Office Use Only



300385979253

04/18/22--01037--030 **60.00

OF APR 15 PMI2: 48

T. MATTHEWS MAY 23 2022

COVER LETTER

SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	David N Helms				
		Name of Person			
	Vision Construction Solutions, LLC Firm/Company				
1724 Shellfish Dr					
		Address	·		
	Navarre, FL 32566				
		City/State and Zip Code			
	Dave@visionconstructionso				
		to be used for future annual report notif	ication)		
For further information c	oncerning this matter, please c	all:			
David N Helms		850 781-9765			
Name o	f Person	Area Code Daytime	e 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)	■ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		

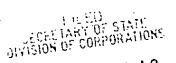
TO:

Registration Section Division of Corporations

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



22 APR 15 PM 12: 48

VISION CONSTRUCTION SOLUTIONS LLC

company has been notified in writing of this change.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on	August 21 201	9 and assigned	
Florida document number L19000214293				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company	v here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," t	he designation "	.LC" or the abbreviation "L.L.C"	
Enter new principal offices address, if applicable:	<u></u>			
(Principal office address MUST BE A STREET ADDRESS)				
Enter new mailing address, if applicable:		-		
(Mailing address MAY BE A POST OFFICE BOX)				

B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on ou	r records, <u>en</u>	ter the name of the new registered	
Name of New Registered Agent:				
New Registered Office Address:				
New Registered Office Address.	Enter Florida street address			
			FloridaZip Code	
	City		Zip Code	
New Registered Agent's Signature, if changing Registered Agent:	ı			
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office	performance provided for v	of my duties in Chapter 60	, and I am familiar with and 95, F.S. Or, if this document is	

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	Sean McGuirk	5023 Bent Tree Rd	
		Milton, FL 32583	=Remove
			□Change
			🗀 Add
			□Remove
			Change
			Remove
			□Change
			
			□Remove
			□ Change
			□Remove
			Change
			□Add
			□Remove
			☐ Change

			_	_	
			-		
					
	<u> </u>				
114 1747					
				<u> </u>	
					<u>.</u>
				_	
		· · · · · ·			
		05/01/2022			
ffective date, if other an effective date is listed, the lote: If the date inserted ocument's effective date	he date must be specific I in this block does no	ling: and cannot be prior to t meet the applica			
record specifies a delaye Lis filed.	ed effective date, but	not an effective tir	me, at 12:01 a.m. on th	ne earlier of: (b) Th	e 90th day after the
ated April 4th	,	2022	./		
ated -		_ ;	_/		
rated	aval N	Helm	<i>/</i>		
rated	aval N Signature o	f a member or autho	rized representative of a	member	