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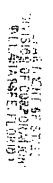
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## **COVER LETTER**

TO: Registration Solution of Co.			
SUNDANG SUBJECT:	CE FRAMING LLC		
SUBJECT:	Name of Lir	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	WAYNE SMITH		
	<u>-</u> ,	Name of Person	
	SUNDANCE FRAMING	LLC	
		Firm/Company	
	4189 B DAIRY CT		
	-	Address	
	PORT ORANGE, FL 321	27	
	wayne.sundance@gail.com	City/State and Zip Code	
	E-mail address:	to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c	all:	
Kay Smith		386 852-3251	
Name of Person			e Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7	Street Address: Registration Sec Division of Con The Centre of T 2415 N. Monroe Tallahassee, FL	porations allahassee e Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUNDANCE FRAMING LLC		-: 8 -
(Name of the Limited Liability	Company as it now appears on our records.)	美 丁
(A rionda i	Limited Liability Company)	6 =
The Articles of Organization for this Limited Liability Co	ompany were filed on 12/02/2019	and assigned
Florida document number 1.19000294574		是 17
i iorida document number	<b>-</b> ∙	76%
This amendment is submitted to amend the following:		-
A. If amending name, enter the new name of the limit	ed liability company here:	<del>-</del> ,
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRI	ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered	office address on our records, enter the	name of the new registered
agent and/or the new registered office address here:	· · · · · · · · · · · · · · · · · · ·	
Name of New Registered Agent:		
New Registered Office Address:		
	(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)  inization for this Limited Liability Company were filed on 12/02/2019  fand disigned mber 1.19000294574  submitted to amend the following:  the, enter the new name of the limited liability company here:  stinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" offices address, if applicable:  ress MUST BE A STREET ADDRESS)  ddress, if applicable:  IY BE A POST OFFICE BOX)  registered agent and/or registered office address on our records, enter the name of the new registy registered office address here:  w Registered Agent:  ered Office Address:  Enter Florida street address  Florida	
	, Florid	
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

CHAID ANCIE ED ANAINO LLO

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 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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n effec ote: It	ve date, if other ctive date is listed, t f the date inserted nt's effective date	the date must be d in this block	specific and does not n	d cannot be neet the ar	oplicable s	of filing of	r more than ling requir	M davs after	<b>onal)</b> r filing.) Pur s date will	suant to 605, not be liste	020' :d as
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Filing Fee: \$25.00