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COVER LETTER

TO: Registration S Division of Co				,
A	Systems, LLC			
SUBJECT:	Name of Lin	mited Liability Company		
The enclosed Articles of	f Amendment and fee(s) are su	bmitted for filing		
	ondence concerning this matter			
	Tommy D. Permenter, Jr.,	, Esq.		
		Name of Person		<u>, , , , , , , , , , , , , , , , , , , </u>
	The Permenter Law Firm,	P.A.		
	***	Firm/Company		
	2201 S.E. 30th Avenue, S	uite 202		
		Address		
	Ocala, Florida 34471			
	<u></u>	City/State and Zip Code		
	tommy@permenterlaw.com	n		
	E-mail address:	to be used for future annua	report notification)	
For further information of	concerning this matter, please c	all:		
Tommy D. Permenter, Ja	r., Esq.	352	622-1811	
Name o	f Person	Area Code	Daytime Teleph	one 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 end		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addres</u> Registration S		Street A		
Division of C			ation Section	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

ADR Wall Systems, LLC		
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability C	Company were filed on December 6, 2019	and assigned
Florida document number L19000298306	<u>_</u> ;	_
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ited liability company here:	
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC" or th	e abbreviation !!L.C."
Enter new principal offices address, if applicable:		020 HAR
Principal office address MUST BE A STREET ADDR	(ESS)	
		.0
		A
Enter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		30
D. If amounding the manifesture description of the state		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, <u>enter the n</u>	ame of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	, Florida	

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 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
President	Scott Rollins	2831 S.E. 17th Street	XAdd
		Ocala, Florida 34471	□Remove
			□Change
			□Add
			Change
<u></u>			□Add
			☐ Change
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fan effeci <u>Note:</u> If	e date, if other than tive date is listed, the date the date inserted in th at's effective date on the	must be specific ar is block does not	nd cannot be prio meet the applie	cable statutory fil	more than 90 days after ing requirements, this	nal) filing.) Pursuant to 605.0207 date will not be listed as
record s d is filed	specifies a delayed effe l.	ective date, but no	ot an effective t	ime, at 12:01 a.n	n. on the earlier of: (b)	The 90th day after the
Dated	March 23	····	2020	<u> </u>	ve of a member	
	(M.Din.	Hims				
	1000	wwy				
	101000	Signature of a	member or auth	orized representati	ve of a member	

Filing Fee: \$25.00