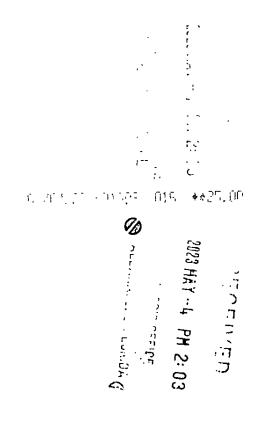
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(Requ	estor's Name)	
(Adgre	ėss)	
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(City/S	State/Zip/Phone #)	-
PICK-UP	TIAW	MAIL
(Susin	ess Entity Name)	
(Docu	ment Number)	
Copies	Certificates o	of Status
Instructions to Filing	Officer:	

Office Use Only



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#### **COVER LETTER**

Registration Section

Tallahassee, FL 32314

TO:

Division of Cor	porations			
SUBJECT: PROJEC	T MANAGEMENT SEI	RVICESTIC		
Someter. Troope	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	indence concerning this matter	to the following:		
	WILLIAM T. HOLLE	:Y		
		Name of Person		
		Firm/Company	, t	
	22352 W. HIGHWA	Y 329	<u> </u>	:
		Address		•
	MICANOPY, FL 32	667 City/State and Zip Code		•
	THOLLEY@PMSER	RVICESFL.COM		
For further information co	E-mail address: ( oncerning this matter, please c	to be used for future annual report noti all:	fication)	
WILLIAM T. HOLLI	- ·	at (_352) <u>234-5526</u>		
Name o	<del></del>		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	
Mailing Address		Street Address:	ution.	
Registration S Division of C		Registration Sec Division of Cor		
P.O. Box 632		The Centre of T	-	

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

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

## PROJECT MANAGEMENT SERVICES LLC (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 Compan	ny were tiled on <u>03/05/20</u>	20 and assigned
Florida document number <u>L20000072918</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
WH CONSTRUCTION, LLC		
The new name must be distinguishable and contain the words "Limited Lial	bility Company," the designatio	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	NIA	
(Principal office address MUST BE A STREET ADDRESS)		
		<u> </u>
		1
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
Truning dum too Mile Degree of Tree Dong		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records,	enter the name of the new registere
	Ma	
Name of New Registered Agent:	181	<del></del>
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
	<del></del>		
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			☐ Change
			□ Add
			□Remove
			Change
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fective date, if other than the date of filing: MAY 1, 2023  In effective date is listed, the date must be specific and cannot be prior to date of filing or more that the date inserted in this block does not meet the applicable statutory filing requiment's effective date on the Department of State's records.	(optional) nan 90 days after filing.) Pursuant to 60 quirements, this date will not be lis
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the d is filed.	e earlier of: (b) The 90th day aft
Dated May 4 2023	
W. Hally Signature of a member of a authorized representative of a	member

Filing Fee: \$25.00