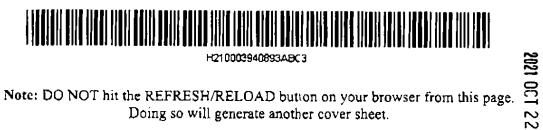


Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : ASMA & ASMA, P.A. Account Number : I20060000067 Phone : (407)656-5750 Fax Number : (407)656-0486

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

mail Address: STEPNGNIE

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN USA POWDER & BLAST WORX LLC

Certificate of Status	0
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ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

USA POWDER & BLAST WORK LLC (Name of the Limited Liability Commune as it now appears on our records.)
(A Plorida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 3/39/2020 and assigned Plorida document number L20000092498 This searchment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (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 address on our records, enter the name of the new registered agent and/or the new registered office address bers:

New Resistered Office Address:	Enter Florida street address		
	- Florida		

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

Name of New Registered Agent:

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

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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

Title	Name	Address	Type of Action
MBR	VIDETTE VAN WYK	14330 EASTSIDE DR.	DAdd
		GROVELAND FL 34736	■ Ramove
			D Change
MBR	STEPHANIE VAN ROOYEN	14330 BASTIDE DR.	DAdd
		GROVELAND FL 34736	Remove
MDR	ARNOLD STEYL	14330 EASTSIDE DR.	# Add
		GROVELAND PL 34736	
			Change
			□Add
			□Remove
			Change
			ПРеторуе
			Classings
			QAdd
			□ Remove

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If the record spe- record is filed.	olfics a delayed affective date,	, but not so effective	time, at 12:01 a.m. or	the earlier of: (b) The	90th day after the
Dated	22 October	. <u>202</u>	<u>, </u>		
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Filing Fee: \$25.00