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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Constance Custom Homes UC Name of Limited Liability Company				
The enclosed Articles of Amendment and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Christina Constance				
Constance Custom Homes UC				
12 S Main St Suite E				
Broxsulle 71 34601				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Christing Constance at (813) 23972 (22) Name of Person Area Code Daytime Telephone Number				
Enclosed is a check for the following amount:				
\$25.00 Filing Fee \$\times \text{Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$\times \text{\$60.00 Filing Fee.}\$\$ Certified Copy (additional copy is enclosed)				
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(instance Cus	ton Home:	SUC	
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our d Liability Company)	records.)	
The Articles of Organization for this Limited Liability Compar Florida document number <u>L2 000/638</u> /8	ny were filed on $\frac{\sqrt{0-15}}{2}$	5 · 2020 and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lis	ability company here:		
The new name must be distinguishable and contain the words "Limited Lia	ability Company," the designation	on "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		2020	· · · · · · · · · · · · · · · · · · ·
(Principal office address MUST BE A STREET ADDRESS)			<u></u>
		<u> </u>	— <u>[</u>
Enter new mailing address, if applicable:			_ (_
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	—
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our records,	enter the name of the new regis	<u>itered</u>
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida stree	t address	
		. Florida	
	Cin [,]	Zip Code	

New Registered Agent's Signature, if changing 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 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
MGR	Scott Constance	12 5 Main Street	Add
		Sute E	□Remove
		Brooksule #134601	□ Change
			□Add
			□Remove
			2020 BCT -2 PM
			Charge 7
			E PER PER PER PER PER PER PER PER PER PE
			□Change
			□Add
			□Remove
			□Change
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			□Remove □Change
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