Florida Department State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

<u>:</u>_:

Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC

Account Number : I20070000020 Phone : (813)435-3176 Fax Number : (813)333-6358

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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Linkitia, C.		
(A Floride Limite	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compar Florida document number L20000232279	y were filed on <u>08/03/2020</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	20: 1.4.
JONTO CONSTRUCTION SERVICES, LLC		22 J
The new name must be distinguishable and contain the words "Limited Liab	pility Company," the designation "LLC" o	r the abbreviation E.L.C."
Enter new principal offices address, if applicable:	152 N. GULF AVE.	AAN AAN
(Principal office address MUST BE A STREET ADDRES,		- The state of the
	CRYSTAL RIVER FL 34429	37. 72
		<u>5</u>
Enter new mailing address, if applicable:	152 N. GULF AVE.	
(Malling address MAY BE A POST OFFICE BOX)		
	CRYSTAL RIVER FL 34429	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	address on our records, enter the	name of the new registered

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 Changing Registered Agent, Signature of New Registered Agent

Florida

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	NICKOLAS SPRADLIN	18801 N. DALE MABRY HWY	□Add
		STE 119	■Remove
		LUTZ 33548 UN	
AMBR	JOHNNY TOMLINSON	152 N. GULF AVE.	
			□Remove
		CRYSTAL RIVER FL 34429	□Change
_			Dbdd
			□ Remove
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ifies a delayed effec	tive date, but r	10t an effecti	ive time, a	t 12:01 a.m. c	on the earlier of: (b) The 90th d	ay after the
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i	date inserted in this effective date on the iffective date on the iffect a delayed effect	date inserted in this block does no effective date on the Department of ifies a delayed effective date, but r	date inserted in this block does not meet the a effective date on the Department of State's recuiring a delayed effective date, but not an effect	date inserted in this block does not meet the applicable seffective date on the Department of State's records. ifies a delayed effective date, but not an effective time, as	date inserted in this block does not meet the applicable statutory filing effective date on the Department of State's records. ifies a delayed effective date, but not an effective time, at 12:01 a.m. of the state	date inserted in this block does not meet the applicable statutory filing requirements, the effective date on the Department of State's records. ifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (2022)	ifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th d

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