L2000382097

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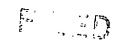
COVER LETTER

TO:

Registration Section

Division of Corporations				
subject. Eddewa	ter Construction Flori	da. I I C		
SUBJECT: Lagowa	Name of Limi	ted Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
		Thomas W Rivera		
		Name of Person		
	Edgewa	ater Construction Florida	a, LLC	
		Firm/Company		
		PO Box 470930		
		Address		
		Celebration FL 34747		
		City/State and Zip Code		
	thon	naswilliam@ransing.com to be used for future annual report note	1	
	E-mail address: (to be used for future annual report not	ilication)	
For further information c	oncerning this matter, please ca	nil:		
Thomas	W Rivera		41-3410	
Name o	i ^r Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for t	he following amount:			
\$25.00 Filing Fee	S30.00 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 Addres		Street Address:	action	
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 6327		The Centre of	l'allahassee	
Tallahassee,	FL 32314	2415 N. Monro Tallahassee, FI	pe Street, Suite 810 L 32303	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



	struction Florida, LLC	3 JAM 13 AM 7: 26
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)	Le Keel Fi
The Articles of Organization for this Limited Liability Company	were filed on12/07/202	0 and assigned
Florida document number <u>L20000382097</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
J. RANSING CONSTRUCTION LLC		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:	15109 Evergreen Oak Loo	p
(Principal office address MUST BE A STREET ADDRESS)	Winter Garden FL 34787	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO Box 470930 Celebration FL 34787	
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 n	name of the new register
New Registered Office Address.	Enter Florida street address	
	Florida	Zip Code
	City	гар Соле

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
			□Add
			Remove
			□ Change
			□Add
			□Remove
			□ Change
			□Add
			□ Велюче
			□Add
			□Remove
			□Change
		□Remove	
			Change
			□Add
			□Remove
			□Change

, ii ainei	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ve date, if other than the date of filing:
the recor	a specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated	January 08 , 2023 .
	Signature of a member or authorized representative of a member
	Thomas W Rivera