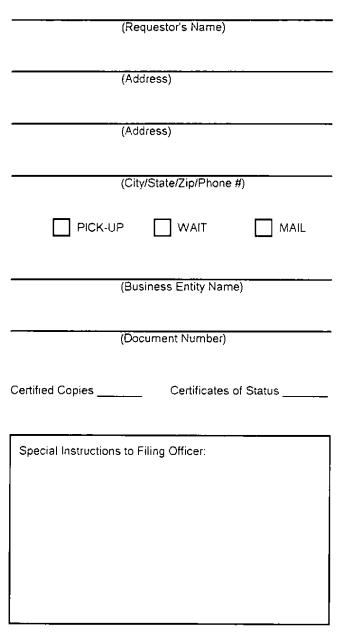
L21 0000 12370



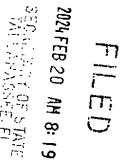
Office Use Only





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COVER LETTER

TO:

Tallahassee, FL 32314

	ration Secti on of Corpo		
SUBJECT:	POWE	RHOUSE CON	TRACTING SERVICES LLC, nited Liability Company
		Name of Lin	miled Elabrity Company
The enclosed A	rticles of Ar	mendment and fee(s) are sub	omitted for filing.
		lence concerning this matter	
ricase return an	Correspond	lence concerning this matter	to the following.
		MARLON	GURRIER!
			Name of Person
			Firm/Company
		2945 W	J KEVIN RD
			Address
		ALLON PARK	FL. 33825
			City/State and Zip Code
		GURRIER!	FL, 33825 City/State and Zip Code M 19 @GMAZL, COM (to be used for future annual report notification)
For further info	rmation con	cerning this matter, please of	
MARLON	GURA Name of P	i e R i	at (954) 995 - 650 Area Code Daytime Telephone Number
Enclosed is a ch	neck for the	following amount:	
□ \$ 25.00 Filir	ng Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy Certificate of Status &
		Certificate of Status	Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailin	ng Address:		Street Address:
Regis	tration Se		Registration Section
	ion of Cor Box 6327	porations	Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

POWER HOUSE CONTRA (Name of the Limited Liability (A Florida L	CTING SERVICES Company as it now appears on our Limited Liability Company)	records.)	
The Articles of Organization for this Limited Liability Co Florida document number <u>L210060 12370</u>		04/2021	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	•		
DEMO DUDES LLC The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation	n "LLC" or the abbrevia	ntion "LL.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	<u></u>		
		ري سوا ا	202
			FEB T
Enter new mailing address, if applicable:			82
(Mailing address MAY BE A POST OFFICE BOX)		50 T	> III
		ָד <u>ּי</u> ק.	<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records,	enter the name of	Φ the new registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street	address	
		, Florida	·
	City	Zi _l	p 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 Changing Registered Agent, Signature of New Registered Agent

or removed MGR = M	from our records: lanager	nanage, enter the title, name, and address of each person being ad		
AMBR = A	Authorized Member	,	Type of Action	
<u> Fitle</u>	<u>Name</u>	Address	Type of Action	
			□Add	
			□Remove	
· · ·			□ Add	
		· · · · · · · · · · · · · · · · · · ·	□Remove	
			□Change	
			□Add	
			□Remove	
			□Add	
			□Remove	
		· · · · · · · · · · · · · · · · · · ·	□ Change	
· · · · · · · · · · · · · · · · · · ·			□Add	
			□ Remove	
		· · · · · · · · · · · · · · · · · · ·	□Change	
			□ Add	
			□Remove	

□ Change

). If amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
 ,	
	······································
(If an effecti Note: If t	date, if other than the date of filing:
the record specord is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	2/13/24 4:20 p.n. Signsture of a member or authorized representative of a member
	MARLON CURRICE Typed or printed name of signee