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TALLAHASSEE

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COVER LETTER

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	HIGHLAN	DS POWER COATING LLC			•		
SUBJECT			nited Liability Company		-		
The enclos	sed Articles of	Amendment and fee(s) are sub	Name of Person Firm/Company Address City/State and Zip Code Re used for future annual report notification)				
Please reti	irn all correspo	ndence concerning this matter	to the following:				
		Karin Ammons					
			Name of Person				
		Fee, Yates, & Fee, PLLC			IVI HOES	2021 A	•
			Firm/Company			S	
		400 NW 2nd Street			SWHY	30	Î
			Address		_ SE 197	P _K	G.
		Okeechobee, FL 34972			STATI		•
			City/State and Zip Code		гч	w	
		kammons@feeyateslaw.cor	n				
		E-mail address: (to be used for future annual report noti	fication)	-		
For further	information co	oncerning this matter, please c	all:				
Karin Ammons Name of Person							
		Area Code Daytim	e Telephone Numb	per			
Enclosed i	s a check for th	e following amount:					
■ \$25.00) Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certifi Certifi	cate of St ed Copy	atus &	
	lailing Addres			ction			
	Division of C		Division of Cor	porations			
	O. Box 632				010		
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Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HIGHLANDS POWER COATING LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liab	oility Company	were filed on 2/5/2021	and assigned	j
Florida document number L21000064190	·			
This amendment is submitted to amend the follow	ring:			
A. If amending name, enter the new name of t	he limited li <u>a</u> t	oility company here:		
HIGHLANDS POWDER COATING LLC			202 SEI T	
The new name must be distinguishable and contain the wor	ds "Limited Liabi	lity Company," the designation		
Enter new principal offices address, if applicab	able:	8002 Associate Blvd	ETA US 3	!
(Principal office address MUST BE A STREET	ADDRESS)	Sebring, FL 33876	ASS A	<u>. </u>
			PH SEE	, }
			3: 8TA:	
Enter new mailing address, if applicable:		8002 Associate Blvd	· H 8	
(Mailing address MAY BE A POST OFFICE BO	2X)	Sebring, FL 33876		
B. If amending the registered agent and/or reg agent and/or the new registered office address Name of New Registered Agent:				
New Registered Office Address:	8002 Associate	e Blvd		
		Enter Florida street e	uldress	
	Sebring		Florida <u> </u>	
		City	Zip Code	
New Registered Agent's Signature, if changing Re-	gistered Agent:			
I hereby accept the appointment as registered a provisions of all statutes relative to the proper accept the obligations of my position as registed being filed to merely reflect a change in the region company has been notified in writing of this change in the regions.	and complete rred agent as gistered office	performance of my dution provided for in Chapter	rs, and I am familiar with and 605, F.S. Or, if this document	1
	If Cha	nging Registered Agent, Signa	ture of New Registered Agent	

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>	<u>Name</u>	<u>Address</u>	Type of Action
			□ Add
			□Remove
			□ Change
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of ote: If the date inserted in this block does not meet the applicable state occument's effective date on the Department of State's records.	of filing or more than 90 days af tutory filing requirements, t	tionar) ler filing.) his date	Pursuan will not	to 605.02 be listed
record specifies a delayed effective date, but not an effective time, at I l is filed.	2:01 a.m. on the earlier of:	(b) The	2 90th d	ay after th
ated February 22 2021				
State a All				
Signature of a member or authorized re				

Filing Fee: \$25.00