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## **COVER LETTER**

TO:

Registration Section

Division of Cor	rporations			
SUBJECT: SWW	r Coustructio	(//		
SUBJECT: _\SUV		ited Liability Company	· · · · · · · · · · · · · · · · · · ·	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
•	, and the second			
	Valerii E	Name of Person  ustuuhon Ld		
	2	Name of Person		
	Sever Con	ustruction dd	i.L	
		Firm/Company		
	157 Pintail	Laue Unit	2309	
	Davenport	FL 33896 City/State and Zip Code		
	1	City/State and Zip Code  V 19 W. gmail. COM		
	VAIETT, KLYTIC E-mail address: (	N 19 (W. gman) COP to be used for further annual report notin	Meation)	
For further information c	concerning this matter, please co	all:		
Valerii		at ( <u>407</u> ) <u>669</u> Area Code Daytim	- 1251	7021
	of Person	Area Code Daytim	e Telephone Number	
				N) **
Enclosed is a check for ti	he following amount:			> 1
√\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	t∃ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fe Certificate of S Certified Copy (additional copy is	imus &
			(additional copy 17	Chewkay
Mailing Addres	<u>ss:</u>	Street Address:		
Registration 5	Section	Registration Sec		
Division of C P.O. Box 632	-	Division of Cor The Centre of T	•	
Tallahassee,			e Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sever Construction	LLC		
(Name of the Limited Liability Co.	mpany as it now appears on our records.) ted Liability Company)		
The Articles of Organization for this Limited Liability Compa	any were filed on 02/12/21	and assign	ned
Florida document number <u>L21000073.568</u> .			
This amendment is submitted to amend the following: amu	ending Authorized	Person	
A. If amending name, enter the new name of the limited l	•		
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or t	he abbreviation "L.L.C	1 14
Enter new principal offices address, if applicable:	<del></del> -		
(Principal office address MUST BE A STREET ADDRESS	)		<del></del>
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			<u>')                                    </u>
		292	
B. If amending the registered agent and/or registered offi	ce address on our records, enter the	name of the new-r	registerec
agent and/or the new registered office address here:			
	•	> -1	
Name of New Registered Agent:		<u> </u>	
New Registered Office Address:		2 [	
	Enter Florida street address		<del></del>
	Florida	1 <u>· ==</u>	
	City	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.

I framending Authorized Person(s) authorized to or remarket from our records:	o manage, enter the title; name, and address of each person being added
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MGR - Manager ,	
Title	Address Type of Action
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AMBR: Valeui E Kirillov	151 Pintail Lane Muit 2303 KARAS Davenport, FL 33896
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