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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	COCYCLE Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	leon	Name of Person	radoa
	Conc	VIL PORIO	ILC.
	453	3 MICCO	Road
	E-mail address: (City/State/anti-Zip Code City/State/anti-Zip Code City/State/anti-Zip Code to be used forfuture annual report noti	33976 Qualication gradio con
For further information c	oncerning this matter, please ca	all:	9
USIR Name o	HONSON f Person	at (772) 416 Area Code Daytim	9-222 ne Telephone Number
Enclosed is a check for the	ne 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 Registration S Division of C	Section	<u>Street Address:</u> Registration Se Division of Co	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Concrete Period LLC
(Name of the Limited Liability Company as if now appears on our records.) (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on 500.23 , 3001 and assigned Florida document number 1000085514
This amendment is submitted to amend the following:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)

A. If amending name, enter the new name of the limited liability company here:

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street	address
		, Florida
	City	Zin 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 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
Mgiz	<u>Leonard D. Hearn</u>	1533 Micco Rd. Micco, FL 32971	Iz Add
		MICCO, FL 32971	<u> </u>
			□Change
			□ Add
			□Remove
			Change
			□Add
			□Remove
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(If an effe <u>Note:</u>	te date, if other than the date of filing:
the record cord is file	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 d.
Dated_	12/19 2022
	Signature of a member or authorized representative of a member
	Jeffrey D. Storp. Type or printed name of signee



Concrete Period LLC 4533 Micco Road Micco, FL 32976 772.412.2222 Marine Bank & Trust 1020 US Hwy 1 Sebastian, FL 32958

63-1424/670

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Florida Dept of State - Div. of Corp.P.

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Florida Dept of State - Div. of Corp.P.
P.O Box 6327
Tallahassee, Florida 32314

MEMO

Sunbiz

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Concrete Period LLC

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12/19/2022

Florida Dept of State - Div. of Corp.P.

Sunbiz

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Marine Bank Ck'ing 8126

Sunbiz

30.00