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(Re	questor's Name)	
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SECRETARY OF STATE

COVER LETTER

	Registration So Division of Co			•	-
SUBJEC		ng Holdings, LLC			
SUBJEC		Name of Lim	ited Liability Company		
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	turn all correspo	ondence concerning this matter	to the following:		
		Michael Mariani			
			Name of Person		-
		Fireproofing Holdings, LL	c		
			Firm/Company	-	
		16333 Bay Vista Drive			
			Address		
		Clearwater, FL 33760			
			City/State and Zip Code		
		mmariani@kenpat-fp.com	to be used for future annual	report notification)	
For furth	er information o	concerning this matter, please c		roport nonnoution)	
Michael		onouthing and matter, proude o	813 52	8-1148	
	Name o	f Person	at () Area Code	Daytime Teleph	one Number
Enclosed	is a check for the	he following amount:			
\$25.0	00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is end		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres	<u>ss:</u>	Street A	ddress:	

Registration Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2021 SEP 10 AM 8: 19

Fireproofing Holdings, LLC SECRETARY OF STATE (Name of the Limited Liability Company as it now appears on our records) ASSEE, FLCHI. (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on March 9, 2021 ___ and assigned Florida document number ______121000113846 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 16333 Bay Vista Drive Enter new mailing address, if applicable: Clearwater, FL 33760 (Mailing address MAY BE A POST OFFICE BOX) 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

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.

City

If Changing Registered Agent, Signature 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>	Address	Type of Action
AMBR	David Cockrum	966 Bucknell Place	= Add
		Rockledge, FL 32955	□Remove
			Change
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Effective date, if other than the of the an effective date is listed, the date must Note: If the date inserted in this bloodocument's effective date on the Department of the date in the Department of the date of the Department of the date of the Department of the date of the date of the Department of the date of the	ek does not meet me	applicable statuto	ng or more than 90 days af ry filing requirements, t	otional) Are filing.) Pursuant to 605.02 Are filing of the listed
ne record specifies a delayed effective ord is filed.	date, but not an effec	ctive time, at 12:0	l a.m. on the earlier of:	(b) The 90th day after th
September 7	, 2921	·		
Dated	4.1 1/1			
	Signature of a member of	or authorized represe	entative of a member	

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