L21000165697

(Requestor's Name)
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(Business Entity Name)
(Document Number)
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2022 MAY 27 PH 6: 27
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AUG 1 2022 S. PRATHER

COVER LETTER

Division of Corp			
SUBJECT:	LSIC Contr	active 2 L C	
The enclosed Articles of A	Amendment and fec(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Dnava	Name of Person	
	L 51C	Cantracting (Firm/Company	LC
	2750	Edwards Ru Address	·
	_ South	Oart FL 324 City/State and Zip Code	09
	E-mail address: (City/State and Zip Code Jan 6 S C to be used for future annual report noti	racting, confication)
For further information co	oncerning this matter, please c	all:	
Name of	ran Meltm Person		- 4196 e Telephone Number
Enclosed is a check for th	e following amount:		
\$25.00 Filing Fee	☐ \$30.00 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 Address Registration S	Section	<u>Street Address:</u> Registration Se	
Division of Co	ornorations	Division of Cor	porations

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

ARTICLES OF OF		202 1 A L
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	PILED 2022 MAY 27 PM ALLAHASSEE, FI
The Articles of Organization for this Limited Liability Company v	vere filed on 4/9/2021	and assigned
Florida document number <u>L2100014569</u> 7		0),
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liabilit	ty Company," the designation "LLC" or the abbi	reviation "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)		
		
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ddress on our records, <u>enter the name</u>	of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
	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.

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
MGR	Andrew Melton	2750 Edwards Rd.	ibredu
		2750 Edwards Rd. Southpart, FL 324	<u>D</u> G□Remove
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fective date, if other than in effective date is listed, the dat ote: If the date inserted in the cument's effective date on t	e must be specific ar nis block does not	nd cannot be prior meet the applica	to date of filing or mo	(option re than 90 days after fi requirements, this o	iling.) Pursuant to	605.0207 listed as
ecord specifies a delayed eff is filed.	lective date, but no	ot an effective tir	ne, at 12:01 a.m. o	n the earlier of: (b)	The 90th day a	after the
ted May	19ths	202	3. 1111		ALLAHA	75 YAN 2505
		and V	Weller		(n) E (n)	1727 PM
	Signature of a	member or autho	rized representative	of a member		7