L21000362777

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Chary Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





200429180922

05/08/24--01016--002 **25.00

RECEIVED

MAY 0 7 2024

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: Burkholder Construct	tion LLC	
Name of Limit	ted Liability Company	
The enclosed Articles of Amendment and fee(s) are subm	nitted for filing.	
Please return all correspondence concerning this matter t	to the following:	
Jenny B	Ul kholder Name of Person	
Burkholder	Con Struction C	<u>'10 - </u>
1481 Miller	,	· · · · · · · · · · · · · · · · · · ·
Sarasota F	City/State and Zip Code	·
burkholder t	remy 6 Gmail. Con o be used for future annual report notifi	ication)
For further information concerning this matter, please ca	11:	
Jerry Burkholder	at (941) 504-	4010
Vame of Person	at (<u>941</u>) <u>504 - 4</u> Area Code Daytime	Telephone Number
Enclosed is a check for the following amount:		
\$25.00 Filing Fee \$\text{S25.00 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 Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Sec Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL	oorations allahassee : Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Quality Complex 1 110

(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our reclability Company)	ords.)
The Articles of Organization for this Limited Liability Company Florida document number <u>L2/000342777</u> .	_	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
Burkhokler Enterprises LLC The new name must be distinguishable and contain the words "Limited Liabil	ity Company." the designation "L	.LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		1
Enter new mailing address, if applicable:		·
(Mailing address MAY BE A POST OFFICE BOX)		
·		<u> </u>
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	nddress on our records, <u>ent</u>	ter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida str ee t ada	tress
		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
			□Add
			□Remove
			□Change
 ,			□Add
			□Remove
			Change
			
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove

							
						 	
						_	
							
							
							
							÷ ,
	<u> </u>						
				1.00			
							1
	,						
-							
	MT				. , <u>-</u>		
ective date, i effective date i	if other than the	e date of filing ist be specific and	g:	to date of filing	or more than 90 o	_ (optional) lavs after filing	.) Pursuant to 605.020
e: If the date	inserted in this b	lock does not n	neet the applic	able statutory			will not be listed a
ument's effec	tive date on the D	repartment of S	state's records				
		4.4 1.4		· 12.01 -	Ab	- C (L) T	00ah J 0 ah
cora specifies s filed.	a delayed effectiv	ve date, but not	i an effective t	ime, at 12:01 a	.m. on the carii	eroi: (b) Ti	ne 90th day after th
	4 3		, 2024	, ·			
$cd_M \alpha$							
ed Ma	\mathcal{I}_{\perp}	_					
cd <u>M</u> Q	Jeron J	runkholo	<u></u>	 			