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C. BRUMBLEY
FEB 17 2022

COVER LETTER

| TO: Registration Se Division of Cor | | | |
|----------------------------------------|-------------------------------------------------|---------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| SUBJECT: | Fab Life Name of Limi | Weldir Company | 15 ', 1/c. |
| The enclosed Articles of | Amendment and fee(s) are sub- | mitted for filing. | |
| Please return all correspo | ondence concerning this matter t | to the following: | |
| | 1/1 | Name of Person | |
| | | Firm/Company | |
| | PO BO | 0× 2-461 Address | |
| | VERO E | SEACH FC City/State and Zip Code | 32961 |
| | E-mail address: (1 | to be used for future and ual report notif | ication) |
| For further information of | concerning this matter, please ca | all: | |
| Name o | DE CGARO | at (<u>\$133</u>) <u>\$0/-</u> Arca Code Daytime | -OB3/ Telephone Number |
| Enclosed is a check for t | he following amount: | | |
| □ \$25.00 Filing Fee | 2 \$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 Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Fab Lite | velding, // L. |
|--------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| | any as it now appears on our records.) Liability Company) |
| The Articles of Organization for this Limited Liability Company | y were filed on $8/42021$ and assigned |
| Florida document numbT 3\000370691 E | |
| This amendment is submitted to amend the following: IT is Space | NAS an error did not enter a |
| A. If amending name, enter the new name of the limited lial | bility company here: |
| Fab L, te Welding. The new name must be distinguishable and contain the words "Limited Lab | ility Company "the decimation "LLC" as the abbreviation "LLC" |
| | |
| Enter new principal offices address, if applicable: | 19365 NW 80 DR. |
| (Principal office address MUST BE A STREET ADDRESS) | UKRECHOSOR H 3494 |
| | |
| Enter new mailing address, if applicable: | m 2012(101 |
| • | 1500 Banch = 200/21 |
| (Mailing address MAY BE A POST OFFICE BOX) | VERO DOCO IFC SURCO |
| | |
| 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: | |
| $\Delta I = I$ | |
| Name of New Registered Agent: | 22 |
| New Registered Office Address: | 一 |
| | Enter Florida street address |
| | Florida Fig. 75 |
| | 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 heing 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 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 |
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| D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
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| E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be fisted as the document's effective date on the Department of State's records. |
| If the record 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 record is filed. |
| Dated |
| Signature of a member of a member VAr DEL (ADI) |
| Typed or peuted name of course |