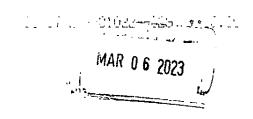
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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: F	Rame of Lin	DWDRKING, LI nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Russel	Name of Person	
		Firm/Company	
	_ 7313 NI	W 47th Ct Address	
		Address	
	<u>Gainesvi</u>	Me, FL 32601 City/State and Zip Code	Φ
	TUSSEN-10 E-mail address: (ges e used for future annual report notif	OV (ication)
For further information co	oncerning this matter, please ca		
Russel	Loges	at (<u>\$13</u>) 392	-9096
Name of	Person	Area Code Daytime	: Telephone Number
Enclosed is a check for the	c 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 Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: 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**

RUSSL WOODWORKING	G, LLC
(<u>Name of the Limited Liability Company</u> (A Florida Lumited Lia	as it now appears on our records.)
The Articles of Organization for this Limited Liability Company we Florida document number <u>L 2200001828</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabili	ty company here:
Evans Holdings FL LLC The new name must be distinguishable and contain the words "Limited Liability	
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1877 SW 1884 St
(Principal office address MUST BE A STREET ADDRESS)	Newberry, FL 32669
Enter new mailing address, if applicable:	1877 SW 188th St
(Mailing address MAY BE A POST OFFICE BOX)	Newberry, FL 32669
B. If amending the registered agent and/or registered office ad	dress on our records, enter the name of the few registered
agent and/or the new registered office address here:	R-6 AHAS
Name of New Registered Agent:	- SO 3
New Registered Office Address: 1877	SW 188th St 17 8
News	SETTY Florida 32469 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 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
			□Add
			□Remove
			Change
			□ Add
			□Remove
			□Change
			□Add
			□ Remove
			☐ Change
			DAdd
			Remove
			Change
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			□Remove
			□Change
			□Add
			□Remove
			□ Change

<u> </u>	
 Note: If the date 	fother than the date of filing:
he record specifies ord is filed.	a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t
Dated <u>3/ C</u>	Signature of a member of authorized representative of a member
	Russell Locies Typed or printed name of signee

Filing Fee: \$25.00