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Division of Corporations

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Phone : (

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Fax Number

: (516)935-3088

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Email Address: joanne@stricklandcpa.com

## WARHORSE SPECIALTY CONTRACTING, LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGÁNIZATION OF

H24000205016

WARHORSE SPECIALTY (Name of the Limit			on our records )		
Life and the state	(A Florida Limited	any as it now appears Liability Company)	on our records.		
the Articles of Organization for this Limited Liability Company were filed on01/19/2022		and assigned			
Florida document number L22000021215					
This amendment is submitted to amend the fol-	lowing:				
A. If amending name, enter the new name of	of the limited liah	oility company her	<u>e</u> :	21	<u> </u>
The new name must be distinguishable and end with the	words "Limited Lial	oility Company," the d	esignation "LLC" or the ab		
Enter new principal offices address, if applie	cable:	186 Cargo W	/ay	~	<
(Principal office address MUST BE A STREE	ET ADDRESS)	Keystone He	ights, FL 32656	Ī	
		••••		<del></del> 05	
Enter new mailing address, if applicable:		186 Cargo W	'ay		25
Mailing address MAY BE A POST OFFICE	BOX)	Keystone Heights, FL 32656			_
no.					
B. If amending the registered agent and registered agent and/or the new registered o	or registered o	ffice address on <u>c</u> :	our records, <u>enter t</u>	he name of the	e ney
New Registered Office Address:	186 Cargo	Way			
CONTROL OF THE TAMES OF	<del></del> -	Enter Florid	la street address		_
	Keystone H	leights	, Florida <u>32</u> 6	556	
		City	,	Zip Code	

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

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

H24000205016

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Selena S. Plummer	186 Cargo Way	<b>=</b> Add
		Keystone Heights, FL 32656	Remove
			□ Remove
			24dd
dec			□ Remove
			AH II: 05Ad
			□ Remove
ส์โกะ	· g		Remove
,			
:	,1		□ Remove

D. If amending	g any other information,	enter change(s) here: (Attach ad	dditional sheets, if necessary.)	
			H24000205	5016
-				
E. Effective da	ite, if other than the date	of filing:	(optional)	
(The effective d the date this d	ate must be specific, cannot be p ocument is filed by the Florida I	prior to date of receipt or filed date and ca Department of State)	nnot be more than 90 days after	
Dated	June 5th	2024		
		7		
-	- El	Am With	me 2	_
	សម្រាត 	fure of a member or authorized represen	tative of a member	
	······································	Bryan Plummer  Typed or printed name of sign	OCC.	-

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