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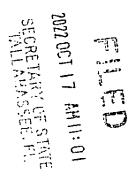
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COVER LETTER

TO: Registration S Division of Co					
D	ECK RESURF	LLC			
SUBJECT:		ited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are sub-	mitted for filing.			
Please return all corresp	pondence concerning this matter	to the following:			
	Sean	C Froehling Name of Person			
		Name of Person			
	DECK	RESURF LLC		71	
		Firm/Company	TAI	f 022 0	
	139	6 NE Flora PI Address	LL AI		
		Address	HRY 1		
	Je	nsen Bch, FL 34957	TARY OF STATE	2022 OCT 17 AH 11:01	
		City/State and Zip Code	75	0	
	Sean Co E-mail address: (deckresurf. com	fication)		
For further information	concerning this matter, please c				
Sean F	rochling	at (904) 525-	4618		
Name	of Person	Area Code Daytim	e Telephone Number		
Carl and the about Con-	the following amount:				
S25.00 Filing Fee	the following amount: \$\Boxed{\Boxes} \$30.00 \text{ Filing Fee & }	☐ \$55.00 Filing Fee &	S60.00 Filing Fee	e.	
tys 323,00 Fitting Fee	Certificate of Status	Certified Copy (additional copy is enclosed)	Certified Copy Certificate of Status &		
Mailing Add		Street Address:			
Registration Section		Registration Se Division of Cor			
Division of Corporations P.O. Box 6327		The Centre of Tallahassee			

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

110.

DEAR RESURF LOS			
(Name of the Limited Liability Compa (A Florida Limited L	Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number <u>L220006 46878</u> .	were filed on Jan 26, 2022 and assigned		
This amendment is submitted to amend the following:	ment number L220000 46878 ment is submitted to amend the following: ding name, enter the new name of the limited liability company here: must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." principal offices address, if applicable: ffice address MUST BE A STREET ADDRESS) mailing address, if applicable: ffices MAY BE A POST OFFICE BOX) ding the registered agent and/or registered office address on our records, enter the name of the new registered of the new registered of the new registered office address here:		
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
	D		
	39		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new regi		
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

Title Name. <u>Address</u> Type of Action Erin D Crawford 1396 NE Flora Pl Ø∧dd Jensen Bul, FL 34957 _____ Change _ 🗆 Remove Change Remove □Change □Add □ Change _____ Change \Box Add _____ □Remove

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fective date, if other than the date of filing:	of filing or more than 90	(optional) days after filing.) P	ursuant to 605.0
te: If the date inserted in this block does not meet the applicable st	tatutory filing requirem	ents, this date wi	ll not be listed
cument's effective date on the Department of State's records.			
ecord specifies a delayed effective date, but not an effective time, at	: 12:01 a.m. on the earl	ior of: (b) The S	Outh day after t
is filed.	12.01 d.M. (ii) the carr	ici of. (b) The	our day arter t
Signature of a member or authorized			
Mars			
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