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COVER LETTER

TO: Registration Sect Division of Corpo			
Pala	nieri Construc	tian 110	
SUBJECT: Yain	Name of Limi	ited Liability Company	
		• • •	
The enclosed Articles of A	mendment and fee(s) are subt	mitted for filing.	
Please return all correspond	dence concerning this matter t	to the following:	
	Krysta	Name of Person	
		Name of Person	
•	Palmier	i Construction	
	- I WITTIET	Firm/Company	<u> </u>
	4335	Reginast	27
		Address	
	Hastinas.	Fl 37145	·
	J	FL, 32145 City/State and Zip Code	
	Palmieri. Cor	Struction, Hic (Damail.com
	E-mail address: (t	to be used for future annual report noti-	D) gmail. (om !
For further information co-	ncerning this matter, please ca	all:	a)
Vaussela	. iv.	00/1 6221	-1.1 <i>0</i>
Name of	Person	at (<u>904</u>) <u>837-1</u> Area Code Daytim	e Telephone Number
	C. 11		
Enclosed is a check for the	_	_	
	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy	☐ \$60.00 Filing Fee, Certificate of Status &
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)
			(additional copy is chelosed)
Mailing Address	<u>:</u>	Street Address:	
Registration S	ection	Registration Se	
Division of Co		Division of Cor	
P.O. Box 6327 Tallahassee, F		The Centre of T	allanassee e Street Spite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

/	(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
	The Articles of Organization for this Limited Liability Company were filed on $\frac{2 9 2027}{2027}$ and assigned Florida document number $\frac{L2200067532}{200067532}$
	This amendment is submitted to amend the following:
	A. If amending name, enter the new name of the limited liability company here:
	The new name must be distinguishable and contain the words "Limited Liability 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)
•	Enter new mailing address, if applicable:
	(Mailing address MAY BE A POST OFFICE BOX)
	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:
	Name of New Registered Agent:
,	New Registered Office Address:
,	Enter Florida street address
	, Florida

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, <u>enter the title</u>, <u>name</u>, and address of each <u>person_being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AP	Raymond Pulmieri	4335 Regina St.	🗆 Add
	'	Hastings FL 32145	
			□Change
MGR	Krystal A. Quirk	4335 Resina St.	Add
		Hastings FL 32145	Remove
			□Change
		, <u> </u>	
			□Remove
			DChange
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Tective date, if other than the date of filing: an effective date is listed, the date must be specific and cote: If the date inserted in this block does not measurement's effective date on the Department of States.	cannot be prior to date c eet the applicable sta	of filing or more than 90 da	
ecord specifies a delayed effective date, but not a is filed.	nn effective time, at 1	12:01 a.m. on the earlier	of: (b) The 90th day after th
nted 02 29 2023 Signature of a m	tember or authorized re	presentative of a member	
Knystal	L QUIVK		