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SECRETARY OF STATE DIVISION OF CORPORATIONS

Y. SCOTT OCT 2 5 2023

## **COVER LETTER**

TO:

	istration Se ision of Cor				•
SUBJECT:	BETTER T	HAN EVER HOME AND LA	AWN MAINTENANCE L.L.C.		
SOBILCT.		Name of Lin	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:		
		Jack Workman			
			Name of Person	<del></del>	
		Audit Ready Inc			
			Firm/Company		20°
		PO Box 604			SECRETARY DIVISION OF CC 2023 OCT 16
		<u></u>	Address		
		Edgewater FL 32132			P CRO
			City/State and Zip Code	<del> </del>	<b>~</b> ≥:∑
		jack@auditreadyinc.com			<b>109</b> (10)
		E-mail address: (	(to be used for future annual report not	fication)	
For further in	formation c	oncerning this matter, please o	eatl:		
Jack Workm	an		386 410-2026		
Name of Person		at () Area Code Daytin	ne Telephone Number		
Enclosed is a	check for th	ne following amount:			
■ \$25.00 F	00 Filing Fee		☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate o Certified Co (additional cop	f Status & py
	ling Addres	<b></b>	Street Address:		
_	gistration S	Section orporations	Registration Se		
	Box 632	•	Division of Cor The Centre of 1		
Tallabassee FL 32314				e Street Suite 210	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BETTER THAN EVER HOME AND LAWN MA	AINTENANCE L.L.C.	
( <u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp	pany were filed on 4/1/2022	and assigned
Florida document number 1.22000158855		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
Better Than Ever Construction Company LLC		
he new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<del></del>	\$ECRE DIV SION
Principal office address MUST BE A STREET ADDRESS	<u> </u>	OCT CRET
		FARTE FCOT E
Enter new mailing address, if applicable:		PH 2
Mailing address MAY BE A POST OFFICE BOX)		- 05 THE
3. If amending the registered agent and/or registered off agent and/or the new registered office address here:	fice address on our records, enter the na	ame of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
		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
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ctive date, if other than the date of filing: _			(optiona	n	
effective date is listed, the date must be specific and can If the date inserted in this block does not meet ment's effective date on the Department of State	not be prior to da the applicable		han 90 days after filin	g.) Pursuan	
ord specifies a delayed effective date, but not an filed.	effective time, :	at 12:01 a.m. on th	ne earlier of: (b) 1	he 90th da	ay after th
oct 13, 2023	2023				
Brent Kent (Oct 13, 2023 09)27 FDT)  Signature of a men					
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