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DIVISION OF CORPERATIONS



COVER LETTER

Registration Section

TO:

Div	ision of Cor	porations			
	Spray Tech	Services, LLC			
SUBJECT:		Name of Lim	ited Liability Company		
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.		
		ndence concerning this matter			
r icase returi	ran correspo	indence concerning and matter	to the following.		
		TJ Woolsey			
			Name of Person		
		Spray Tech Services, LLC			
			Firm/Company		
		1569 Chandlee Avenue			
			Address		2623
		Panama City, Florida 3240	15		2623 OCT 17
			City/State and Zip Code		
		tj@needsprayfoam.com	<u></u>		-
			to be used for future annual report	notification)	PM 12: 40
For further i	nformation c	oncerning this matter, please c	all:		0
TJ Woolsey			337 852-1049)	
	Name o	f Person		rtime Telephone Number	
Enclosed is	a check for th	he following amount:			
□ \$25.00	Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclose	
	ailing Addres		Street Address Registration		
Registration Section Division of Corporations			Registration Section Division of Corporations		
	O. Box 632			of Tallahassee	
Fa	Hahassee, l	たL 32314	2415 N. Moi	nroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Spray Tech Services, LLC					
(Name of the Limited)	Liability Compa Visionida Limited	inv as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liab	bility Company	were filed on 06/06/2022	aı	nd assig	ned
Florida document number 1.22000257558	·			_	
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	he <u>lim</u> ited liab	oility company here:			
Spray Tech Services, LLC					
The new name must be distinguishable and contain the wor	ds "Limited Liabi	lity Company," the designation "LLC" or th	ne abbreviati	on "L.L.(
Enter new principal offices address, if applicat	ole:	1569 Chandlee Avenue			
(Principal office address MUST BE A STREET	ADDRESS)	Panama City, Florida 32405		20:	- GIV
				3 0	MOISIA13
				=	유 유
Enter new mailing address, if applicable:		-		-	<u> </u>
(Mailing address MAY BE A POST OFFICE BO			PH	<u> </u>	
				- <u></u>	
_				0	
B. If amending the registered agent and/or reg agent and/or the new registered office address	istered office : here:	address on our records, <u>enter the n</u>	name of th	e new r	egistere
Name of New Registered Agent:	Agent: Lauren Woolsey			-	
New Registered Office Address:	1569 Chandlee	Avenue			
		Enter Florida street address			-
	Panama City	Florida	32405		
		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>	Name	<u>Address</u>	Type of Action
Mr.	Kenneth A. Mattingly	512 Pennsylvania Avenue	□Add
		Lynn Haven, Florida 32444	≡ Remove
			□Change
Mr.	TJ M. Woolsey	4841 Conner Lane	□Add
		Panama City, Florida 32404	□Remove
			■ Change
Mr.	Landyn B. Woolsey	4841 Conner Lane	
		Panama City, Florida 32404	□Remove
			≅ Change
Mrs.	Lauren M. Hebert-Woolsey	4841 Conner Lane	■Add
		Panama City, Florida 32404	□Remove
			Change
			CHVISION PET CORPUSATION.
			□Remove
			□Change

. If amending any other information.					
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Effective date, if other than the date	of filing:		(optio	n n 1 \	
(If an effective date is listed, the date must be sp. Note: If the date inserted in this block de-	recific and cannot be pri	or to date of tiling or n	nore than 90 days after f	iling A Pursuant to 6	05.0207 (
document's effective date on the Departr	nent of State's record	ls.	g requirements, tills	date will not be n	isten as n
he record enecifies a delegand official dec	harman and the second			Page 1	
he record specifies a delayed effective date ord is filed.	, out not an effective	ume, at (2)01 a.m.	on the earlier of: (b)	The 90th day af	ter the
Dated 10 10					
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Signa	tire of a member or au	librized r presentative	of a member		
		solsed med name of signee			