Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN XPRESS DESIGN & BUILD LLC

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Page Count	04
Estimated Charge	\$25.00

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[04] 2.1 2022

(Brumble)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Xpress Design & Build LLC				
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number L22000308759		and assigned		
This amendment is submitted to amend the following:				
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	ity Company," the designation "LLC" or the abb	previation "L.L.C."		
Enter new principal offices address, if applicable:	2435 US Highway 19	 		
(Principal office address MUST BE A STREET ADDRESS)	suite 140			
	Holiday, FL 34691			
Enter new mailing address, if applicable:	2435 US Highway 19	11-21-11-11-11-11-11-11-11-11-11-11-11-1		
(Mailing address MAY BE A POST OFFICE BOX)	suite 140			
	Holiday, FL 34691			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	Enter Floridu street address	of the new registered 2022 July 2 PH		
 	, Florida	Zip Code		
New Registered Agent's Signature, if changing Registered Agent:		· 53		

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
_AMBR	Melissa Marketis	2435 US Highway 19	
		suite 140	□Remove
		Holiday, FL 34691	□Change
			□Add
		 	□Remove
			□Add
			□ Remove
		······································	□Change
			□Add
		-11	Remove
			[]Change
			□Add
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			□Add
			Remove
			□Change

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(If an effective Note: If the	edate is listed, the date must be date inserted in this bloom	be specific and cannot be prior ask does not meet the application artiment of State's records.	to date of filing or more		
the record specord is filed.	ecifies a delayed effective	date, but not an effective tir	me, at 12:01 a.m. on t	he earlier of: (b) The	90th day after the
Dated	July 21	. 2022	·		
		Rilm Pai	۷.,		
•	S	ignature of a member or autho	rized representative of a	member	***************************************
		Riley Park			

Filing Fee: \$25.00