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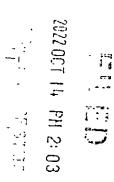
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| Special Instructions to Filing Officer: |
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| SUBJEC | | erior Construction Services LL | С | | |
| 30031.0 | ×1 | Name of Lim | ited Liability Company | | |
| The encl | osed Articles of | Amendment and fee(s) are sub | mitted for filing. | | |
| Please re | eturn all correspo | ndence concerning this matter | to the following: | | |
| | | Michael Dempsey | | | |
| | | | Name of Person | - | |
| | | ZenBusiness Inc. | | | |
| | | | Firm/Company | | |
| | | 336 E College Ave, Ste 30 | 1 | | |
| | | · · · · · · · · · · · · · · · · · · · | Address | | |
| | | Tallahassee, FL 32301 | | | |
| | | City/State and Zip Code | | | |
| | | fulfillment@zenbusiness.co | | | |
| Usan Banda | | | to be used for future annual report notifica | ition) | |
| | | oncerning this matter, please ca | all: | | |
| Michael Dempsey c/o ZenBusiness Inc. | | | 844 493-6249 at () | | |
| | Name of | f Person | | elephone Number | |
| Enclosed | l is a check for th | ne following amount: | | | |
| ■ \$25. | 00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) | |
| | Mailing Addres Registration S | | <u>Street Address:</u> Registration Section | on | |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street. Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2022 OCT 14 PH 2: 03 Quality Interior Construction Services LLC (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 08/18/2022 and assigned Florida document number 1.22000364269 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 "LLC." 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.

City

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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| ffective date, if other than the an effective date is listed, the date mutote: If the date inserted in this bocument's effective date on the E | st be specific and cannot ock does not meet t | he applicable stat | filling or more than 90 utory filling requirem | (optional) days after filing.) Pursents, this date will | suant to 605.0207 not be listed as |
| record specifies a delayed effectivistiled. | re date, but not an ef | ffective time, at 1 | 2:01 a.m. on the earli | icr of: (b) The 90t | h day after the |
| October 10 | | | | | |
| /s/ George Mille. | ÷ | | | | |
| | Signature of a memb | er or authorized rep | presentative of a member | er | |
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Filing Fee: \$25.00