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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.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SATISFIED BUILD LLC

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Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Satisfied Build LLC	and as it may appears on our roo	ords)
(Name of the Limited Liability Com (A Florida Limite	d Liability Company)	<u>ur us.)</u>
The Articles of Organization for this Limited Liability Compar Florida document number <u>L22000407927</u>	ny were filed on <u>09/19/22</u> (and assigned
The Articles of Organization for this Limited Liability Company were filed on 09/19/2202 and assigned		
A. If amending name, enter the new name of the limited liz	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	ability Company," the designation "I	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		122 0 0
(Principal office address MUST BE A STREET ADDRESS)		<u>Ξω Ξ</u>
		7C. 23
Enter new mailing address, if applicable:		<u>ූ දි</u>
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
	e address on our records, <u>en</u>	ter the name of the new registered
Name of New Registered Agent:		100
New Registered Office Address:		
	Enter Florida street ad	dress
-		Florida
	City	Zip Coae

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
AMBR	Meghan Reynolds	1205 Maravista Dr,	X (Add
		Trinty, FL 34655	□Remove
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E. Effective date, if other than t (If an effective date is listed, the date r Note: If the date inserted in this document's effective date on the	ne date of filing: must be specific and cannot be prior to date of the block does not meet the applicable statut Department of State's records.	(optional) ling or more than 90 days after filing.) Pur- ory filing requirements, this date will	suant to 605,0207 (3)(b) not be listed as the
If the record specifies a delayed effect record is filed.	tive date, but not an effective time, at 12:	01 a.m. on the earlier of: (b) The 90t	th day after the
Dated 10/13	. 2022		
Margan John	Signature of a member or authorized repre	sentative of a member	
Morgan No			
	Typed or printed name of	signee	

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