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COVER LETTER

TO:	Reg Divi	istration S sion of Co	Section orporations		
SHRIE	ൗ.	SOUTHE	RN FLORIDA EPOXY LLC		
SOBJEC			Name of Lin	nited Liability Company	
The encl	osed	Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please re	turn :	all corresp	ondence concerning this matter	r to the following:	
,			DAVID ORTIZ		
				Name of Person	
			SOUTHERN FLORIDA I	EPOXY LLC	
				Firm/Company	
			PO BOX 367363		
				Address	
			BONTTA SPRINGS FL 3-	1 135	
				City/State and Zip Code	
			DORTIZ270@GMAIL.CO		
				to be used for future annual report n	otification)
For furthe	er info	ormation c	oncerning this matter, please c	all:	
DAVID (ORTI	Z		239 4054387 at ()	
		Name o	f Person	Area Code Dayt	ime Telephone Number
Enclosed i	is a c	heck for th	ne following amount:		
■ \$25.0°	0 Fili	ng 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 Address:

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

Street Address:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOUTHERN FLORIDA EPOXY LLC

company has been notified in writing of this change.

(Name of the Limited Liability Company as it now appears on our records.)

This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: FLORIDA GROUP EPOXY LLC 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 Enter Florida attreet address Enter Florida Tip Code	(A Florida Limited l	Liability Company)	±1		
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	The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.22000413679}{1.22000413679}$.	were filed on <u>09/22/2022</u>	and assigned		
FLORIDA GROUP EPOXY LLC 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 City Zip Code	This amendment is submitted to amend the following:				
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 Enter Florida Time Toolea Time Time Time Time Time Time Time Time	A. If amending name, enter the new name of the limited liab	ility company here:			
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 Enter Florida street address Florida Zip Code	FLORIDA GROUP EPOXY LLC				
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B. If amending the registered agent and/or registered office address on our records, enter the name of the new registagent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Enter Florida			<u> </u>		
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registagent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City Zip Code	Enter new mailing address, if applicable:				
Name of New Registered Agent: New Registered Office Address: Enter Florida street address City Zip Code	(Mailing address MAY BE A POST OFFICE BOX)				
Name of New Registered Agent: New Registered Office Address: Enter Florida street address City Zip Code					
Enter Florida street address, Florida City Zip Code	agent and/or the new registered office address here:	address on our records, <u>enter t</u>	he name of the new regis		
, Florida	New Registered Office Address:				
·		Enter Florida street address			
·		, Florida			
New Registered Agent's Signature, if changing Registered Agent:		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	provisions of all statutes relative to the proper and complete	• • •			

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

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>	<u>Address</u>	Type of Action
			□Add
			□Remove
			□Change
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: date is listed, t e date inserted	he date must be sp I in this block do	ecific and ca ses not mea	unnot be prior t	to date of filing	or more than filing requir	90 days after til	ing) Pursuant to	605.020 listed as
cities a delaye	ed effective date	, but not an	reffective tin	ne, at 12:01 a	i.m. on the ea	urlier of: (b)	The 90th day :	ifter the
/EMBER 22			2022					
	12 /			 ·				
	date is listed, to date inserted effective date ciffes a delaye	date is listed, the date must be speed date inserted in this block de effective date on the Department of the Department	date is listed, the date must be specific and ca e date inserted in this block does not men effective date on the Department of Sta cifies a delayed effective date, but not an	edate inserted in this block does not meet the applica effective date on the Department of State's records. cifies a delayed effective date, but not an effective tir	date is listed, the date must be specific and cannot be prior to date of filing date inserted in this block does not meet the applicable statutory effective date on the Department of State's records. cifies a delayed effective date, but not an effective time, at 12:01 a	date is listed, the date must be specific and cannot be prior to date of filing or more than a date inserted in this block does not meet the applicable statutory filing require effective date on the Department of State's records. cifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear	date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after file date inserted in this block does not meet the applicable statutory filing requirements, this deffective date on the Department of State's records. cifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b)	date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to a date inserted in this block does not meet the applicable statutory filing requirements, this date will not be effective date on the Department of State's records. cifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day;

Typed or printed name of signee