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| (Re | questor's Name) | _ |
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| (Cit | y/State/Zip/Phone | ≘ #) |
| PICK-UP | MAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer. | |
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Office Use Only



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COVER LETTER

TO:

Registration Section

| Division of C | orporations | | |
|-------------------------------------|--|---|---|
| SPRING | HILL CONSTRUCTION REMO | DDELLING, LLC | |
| SUBJECT: | Name of Lin | nited Liability Company | |
| The enclosed Articles of | of Amendment and fee(s) are sub | omitted for filing. | |
| Please return all corres | pondence concerning this matter | to the following: | |
| | DONALD M. WILMORE | E. JR. | |
| | | Name of Person | |
| | SPRINGHILL CONSTRU | JCTION REMODELING, LLC | |
| | - | Firm/Company | |
| | 1103 WESTBURY POIN | TE DR. SUITE 103 | |
| | | Address | |
| | BRANDON, FL 33511 | | |
| | | City/State and Zip Code | |
| | DWILMORE1963@GMA | IL.COM to be used for future annual report noti: | · · · · · · · · · · · · · · · · · · · |
| For further information | concerning this matter, please c | • | neation) |
| DONALD M. WILMO | | 813 362-0114 | |
| | of Person | at () | |
| Name | Official | Area Code Dayum | e Telephone Number |
| Enclosed is a check for | the 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 enclosed) |
| <u>Mailing Addr</u> Registratior | | Street Address: Registration Sec | ction |
| Division of | Corporations | Division of Cor | porations |
| P.O. Box 63 Tallahassee | | The Centre of T | allahassee e Street, Suite 810 |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SPRINGHILL CONSTRUCTION REMODELLING, LLC

2022 0 . 7 31 7 110: 40

(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 10/06/ | 2022 | and assigned |
|---|--------------------------|----------------------------|-----------------------|
| Florida document number 1.22000431495 | | | |
| This amendment is submitted to amend the following: | | | |
| A. If amending name, enter the new name of the limited liab | ility company here: | | |
| SPRINGHILL CONSTRUCTION REMODELING, LLC | | | |
| The new name must be distinguishable and contain the words "Limited Liabil | lity Company," the desig | nation "LLC" or the abb | reviation "L.L.C." |
| 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 a agent and/or the new registered office address here: | address on our reco | rds, <u>enter the name</u> | of the new registered |
| Name of New Registered Agent: | | _ | |
| New Registered Office Address: | Enter Florida | street address | |
| | | Florida | |
| | 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 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 | |
|---|--------|------------|--------|
| ٠ | AMBR = | Authorized | Member |

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
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| | 10/10/2022 | | |
| ffective date, if other than the o | late of filing: | to date of filing or more than 9 | (optional) 0 days after filing.) Pursuant to 605.0207 |
| lote: If the date inserted in this blo | ck does not meet the applic | able statutory filing require | ments, this date will not be listed as |
| ocument's effective date on the De | partment of State's records. | | |
| | | | |
| record specifies a delayed effective I is filed. | date, but not an effective ti | me, at 12:01 a.m. on the ea | rlier of: (b) The 90th day after the |
| OCTOBER 10 | 2022 | | |
| ated | | | |
| 7 | _ | | |
| | Signature of a member or author | | |

Typed or printed name of signee