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C7/15/24

COVER LETTER

TO:		istration Sec sion of Corp						
OUBLE	corr.	Habermann	Construction, LLC					
SUBJEC	CIE		Name of Lim	ited Liability Compar	ny		_	
The encl	losed	Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please re	eturn	all correspoi	ndence concerning this matter	to the following:				
			Heath A. Habermann					
				Name of Person	DII			
			Habermann Construction,	LLC				
				Firm/Compar	ıy			
			204 River Drive					
				Address				
			Tequesta, FL 33469					2
			• • •	City/State and Zip	Code	-		·· •
			andy@novaconfl.com				- 35 K	∪,
For furt	her in	formation co	E-mail address: (oncerning this matter, please c	to be used for future:	annual report notif	fication)	E SE	PH 1:45
		bermann		561	267-5620		J.E	45
		Name of	Person	at (Area Cod) le Daytimo	e Telephone Nu	mber	_
Enclose	d is a	check for th	e following amount:					
■ \$2 5	.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filin Certified Co (additional cop	ору	Certi	ificate of ified Cop	Status &
	Reg Div		Section orporations	Re Di	reet Address: egistration Sec ivision of Cor	porations		
). Box 632 lahassee, F			ne Centre of T 15 N. Monro		te 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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		and assigned
ability company here:		
bility Company," the designation	"LLC" or the abbr	eviation "L.L.C."
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201 N US Highway 1, St	iite D10 # 1001_1	PH ::
Jupiter, FL 33477	F 15	***
	<u> </u>	ن ن
Jupiter, FL 33477	<u> </u>	
Enter Florida street	address	
	421 4 4	
City	_, Florida	Zip Code
1	bility company here: bility Company," the designation 201 N US Highway 1. Su Jupiter, FL 33477 e address on our records, of	bility Company," the designation "LLC" or the abbreach street 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.

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>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Remove
			Change SSC PP H SSC PP Add Add
			□Remove
			□Change
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			□Remove
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Filing Fee: \$25.00