123000006860

| (Requ | estor's Name) | |
|-----------------------------|----------------|---------------|
| | | |
| (6.13 | | |
| (Addre | 95S) | |
| | | |
| (Addre | ess) | |
| (idea. | , | |
| | | |
| (City/S | State/Zip/Phon | ie #) |
| | | |
| PICK-UP | ☐ WAIT | ☐ MAIL |
| | | |
| | | |
| (Busir | ness Entity Na | me) |
| (544 | , | ···- , |
| | | |
| (Docu | ment Number |) |
| | | |
| | A | £ 04=4 := |
| Certified Copies | Certificate | es of Status |
| | | |
| | | |
| Special Instructions to Fil | ing Officer: | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Office Use Only



500401138835

02/01/23--01028--007 **25.00

2023 FEB - I AH 9: 0 SECOL BASIC OF STATE

.COVER LETTER

| Division of Cor | porations | | | |
|----------------------------|--|---|------------------|---------------------------|
| FRANK D | RYWALLTLC | | | |
| SUBJECT. | Name of Lim | ited Liability Company | | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | | |
| | ondence concerning this matter | | | |
| r rease recurr an correspo | mache concerning this matter | 10 mil 10 mil 1 mil 1 | | |
| | Molly Hoopes | | | |
| | · · · | Name of Person | | |
| | New Business Filing | | | |
| | | Firm/Company | | |
| | 8170 Washington Village Drive | | | |
| | | Address | | |
| | Dayton, Ohio 45458 | | | 2023 FEB - I SECRLIARY |
| | | City/State and Zip Code | | B- |
| | orders@newbusinessfiling. | org to be used for future annual report notific | ation | 3-1 A |
| | | | ation) | AM 9: 03 OF STATE |
| For further information of | concerning this matter, please of | all: | | 9: 0 |
| Jenise Rosado | | 888- 701-6450 at () | | π ω |
| Name o | of Person | | Felephone Number | |
| Enclosed is a check for t | he following amount: | | | |
| ■ \$25,00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | Certified | e of Status & |
| <u>Mailing Addre</u> | <u>ss:</u> | Street Address: | | |

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

TO:

Registration Section

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

| Frank Drywall LLC | 4 | |
|---|---|-----------------------------|
| (<u>Name of the Limited Liability</u> (A Florida | y Company as it now appears on our record Limited Liability Company) | <u>(S.</u>) |
| The Articles of Organization for this Limited Liability Co | ompany were filed on 01/03/2023 | and assigned |
| lorida document number 1.23000006860 | _· | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limit | ted liability company here: | |
| he new name must be distinguishable and contain the words "Limi | ted Liability Company," the designation "LLC | |
| Enter new principal offices address, if applicable: | | \$E C 3F |
| Principal office address MUST BE A STREET ADDR | ESS) | |
| | | |
| | | |
| Enter new mailing address, if applicable: | | |
| Mailing address MAY BE A POST OFFICE BOX) | | 03 |
| | | |
| | | |
| If amending the registered agent and/or registered agent and/or the new registered office address here: | l office address on our records, <u>enter</u> | the name of the new registe |
| gent and/or the new registered office address here. | | |
| Name of New Registered Agent: | | |
| | | |
| New Registered Office Address: | Enter Florida street addre. | ss |
| | <u></u> | |
| | | lorida |

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> | <u>Address</u> | Type of Action |
|--------------|---------------|----------------------------|---------------------------------------|
| MGR | Jenise Rosado | 2681 University Blvd North | |
| | | Jacksonville Florida 32211 | □Remove |
| | | | |
| | <u> </u> | | |
| | | | □ Remove |
| | | | □Change |
| | | | □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ |
| | | | - Schange T |
| | | | □Remove |
| | | | □Change |
| | | | □Add |
| | | | □Remove |
| | | | □Change |
| | | | □Add |
| | | | □Remove |
| | | | □Change |

| If amending any other info | rmation, enter | change(s) here | : (Attach addition | al sheets, if neces | sary.) | |
|---|--|--|--|---|-------------------------|-----------------------------|
| | | | - | | | |
| | | | | | | |
| | | | - · | | | |
| | | | | | | |
| | | | | | | |
| | | | | , - · · · · · · · · · · · · · · · | | |
| | | | . | | | |
| | | | | | <u> </u> | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| - | | | | | | |
| | | | | | | |
| | | | . | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Effective date, if other than fan effective date is listed, the date inserted in the date inserted in the document's effective date on the document's effective date. | te must be specific his block does no | and cannot be prior ot meet the applica | to date of filing or mo able statutory filing | (option re than 90 days after fi requirements, this o | iling.) Pursuant | to 605.0207 be listed as |
| ropord specifies a deleved of | fective date, but | not an effective ti | me, at 12:01 a.m. o | n the earlier of: (b) | The 90th day | |
| · - | | | | | ·! | |
| rd is filed. | | 2023 | | | |)23 FEE |
| rd is filed. | | 2023 | | | MILATINES CR. TARY O | <u> </u> |
| rd is filed. | Signature of | · | prized representative of | of a member | | лев-1 AM 9: 03 |