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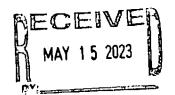
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MA	AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	<u>.</u>
Special Instructions to Filing Officer:	
MAY 15 2023	

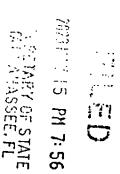
Office Use Only

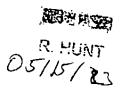


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05/16,23--01002--003 **25.00







COVER LETTER

.

TO:	Registration Se Division of Cor			
en o re		ilding Services, LLC		
SUBJE	UI:	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	indence concerning this matter	to the following:	
		Kaylan Walden		
			Name of Person	
		Acadian Building Services	i, LLC	
		· · · · · · · · · · · · · · · · · · ·	Firm/Company	
		1320 E Olive Road		
			Address	
		Pensacola, FL 32514		
			City/State and Zip Code	
		kaylan@rubin-investments.		
		E-mail address: (to be used for future annual report no	tification)
For furth	her information c	oncerning this matter, please c	all:	
Kaylan	Walden		850 937-7061	
	Name o	f Person	at () Area Code Daytii	me Telephone Number
Enclosed	d is a check for th	ne following amount:		
■ \$25	.00 Filing 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 Addres Registration S		Street Address: Registration S	ection
	Division of C		Division of Co	
	P.O. Box 632	7	The Centre of	Tallahassee
	Tallahassee, l	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Acadian Building Services, LLC (Name of the Limited Liability Compa- (A Florida Limited	uny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company florida document number 1.23000027219	were filed on 01/12/2023	a	nd assi	gned
This amendment is submitted to amend the following:				
· ·				
a. If amending name, enter the new name of the limited liab	oility company here:			
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" of	or the abbreviat	ion "L.I	C."
Inter new principal offices address, if applicable:	603 E. Government St, Ste A	: 4	26.7	
Principal office address MUST BE A STREET ADDRESS)	Pensacola FL 32502	,		
		? >	. V .	l pie.
		AS	U)	i acu
nter new mailing address, if applicable:	603 E Government St, Ste A	O CO	$\frac{P}{2}$	Lanna Sada
Mailing address MAY BE A POST OFFICE BOX)	Pensacola, FL 32502		7:	<u>_</u>
		Lill E	<u>⊕</u>	
3. If amending the registered agent and/or registered office gent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter th	िम e name of tl		reg
Now Projectored Office Address:				
New Registered Office Address:	Enter Florida street address			
New Registered Office Address:	Enter Florida street address, Flori	ida	Code	

provisions of all statutes relative to the proper and complete performance of my duties, and 1 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
			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			☐ Change
			□Add
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change

-	
Mantino.	data if ather then the data of filing.
<u>ote:</u> If t	date, if other than the date of filing:
ecord sp is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ited	April 17 2023
	Signature of a member or authorized representative of a member
	Ilona Szala: Stephens Typed or printed name of signee

Filing Fee: \$25.00