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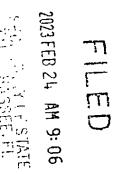
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COVER LETTER

TO:

	Extreme (Concrete Coatings of SW Fl., I	LC .	
SUBJECT	:	Name of Lim	ited Liability Company	
The enclos	Name of Limited Liability Company sed Articles of Amendment and fee(s) are submitted for filing. urn all correspondence concerning this matter to the following: Christina Patrick Name of Person Patrick's Bookkeeping & Tax Services, LLC Firm/Company 27011 65th Ave East Address Myakka City, FL. 34251 City/State and Zip Code Patricksbookkeeping@outlook.com E-mail address: (to be used for future annual report notification) r information concerning this matter, please call:			
Please retu	rn all correspo	ondence concerning this matter	to the following:	
		Christina Patrick		
			Name of Person	
		Patrick's Bookkeeping	& Tax Services, LLC	
			FirmvCompany	
	Firm/Company 27011 65th Ave East Address Myakka City, FL. 34251			
	Firm/Company 27011 65th Ave East Address Myakka City, FL. 34251 City/State and Zip Code Patricksbookkeeping@outlook.com			
		Myakka City, FL. 3425	51	
			City/State and Zip Code	.
		E-mail address: (to be used for future annual report noti	fication)
For further	information c	oncerning this matter, please c	all:	
Christina F	Patrick			
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is	s a check for th	ne following amount:		
\$25.00	Filing Fee		Certified Copy	Certificate of Status & Certified Copy
				etion
	egistration s vivision of C		Registration Secondary	
	O. Box 632		The Centre of T	
T	allahassee l	71 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Extreme Concrete Coatings of SW FL, LLC		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L23000058371</u> .	y were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		023
		22
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
		- m m
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the</u>	name 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 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AR	Christina Patrick	27011 65th Ave East	□Add
		Myakka City, Fl. 34251	■ Remove
			Change
			□Add
			□Remove
			□Change
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ecord specifies a delayed effective is filed.	date, but not an effective	time, at 12:01 a.m. or	the earlier of: (b) Th	ic 90th day after th
ed	2023			
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Filing Fee: \$25.00