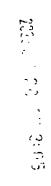
L23000091926

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	—
Special Instructions to Filing Officer:	





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S. ROBERTS

JUL 2 1 2023

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195 REFERENCE : 887089 5152828 AUTHORIZATION : COST LIMIT ORDER DATE : July 20, 2023 ORDER TIME : 1:38 PM ORDER NO. : 887089-005 CUSTOMER NO: 5152828 DOMESTIC AMENDMENT FILING NAME: FAULKNER ENGINEERING SERVICES, LLC EFFECTIVE DATE: XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY
XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

CONTACT PERSON: Eyliena Baker -- EXT#

DocuSign Envelope ID: 297CD9B2-5052-4F40-80C2-DB1D349701E5 CUVER LETTER

	Registration Se Division of Cor			
enore		ER ENGINEERING SERVICE	S, LLC	
SUBJEC	JI:	Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub ondence concerning this matter	_	
		BENJAMIN BUTTERFIE	SLD	
			Name of Person	
		FAULKNER ENGINEER	ING SERVICES, LLC	
			Firm/Company	
		2734 CAUSEWAY CENT	ER DRIVE	
			Address	
		TAMPA, FL 33619		
			*City/State and Zip Code	
		bbutterfield@teamues.com E-mail address: (to be used for future annual report no	tification)
For furth	er information c	concerning this matter, please c	•	
	n Butterfield		407 4727978	
		of Person	at () Area Code Dayti	me Telephone Number
Enclosed	l is a check for th	he following amount:		
□ \$2 5.6	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration 5		Street Address: Registration S	ection

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

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

DocuSign Envelope ID: 297CD9B2-5052-4F40-80C2-DB1D349701E5 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

(Name of the Lim	ited Liability Company as it now (A Florida Limited Liability Com	appears on our records.)	
	(A Florida Limited Liability Com	ipany)	
The Articles of Organization for this Limited	Liability Company were filed	on 02/28/2023	and assigned
Florida document number L23000091926			
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liability compa	any here:	
The new name must be distinguishable and contain the	words "Limited Liability Company	"the designation "L1.C" or	the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:		20
(Principal office address MUST BE A STRE			,
Trinedyar office data con Mediting A OTHE		-	•
		 -	(2)
Catana and madina address if anniforhis			•
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u></u>	_	
		.	
B. If amending the registered agent and/or	registered office address on	our records, enter the	name of the new regis
agent and/or the new registered office addr		<u> </u>	
Name of New Registered Agent:	Corporation Service Comp.	any	
N. D. Grand Correct Add	1201 Hays Street		
New Registered Office Address:		ter Florida street address	
	Tallahassee	F1 1	32301
	City	Florid	$a \frac{32301}{Zip\ Code}$

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. Eylina Baheri Assistant Vice President

If Changing Registered Agent, Signature of New Registered Agent

DocuSign Envelope ID: 297CD9B2-5052-4F40-80C2-DB1D349701E5 in amending Authorized rerson(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
President	David W. Faulkner, Jr	2734 CAUSEWAY CENTER DRIVE	≡ Add
		TAMPA, FL 33619	□Remove
		, <u> </u>	🗀 Change
VP	John Gregos	2734 CAUSEWAY CENTER DRIVE	= Add
		TAMPA, FL 33619	Remove
			□Change
EVP	Rick Kushner	2734 CAUSEWAY CENTER DRIVE	≣Add
		TAMPA, FL 33619	□Remove
			□Change
Secretary	Benjamin Butterfield	2734 CAUSEWAY CENTER DRIVE	= Add
		TAMPA, FL 33619	□Remove
		·	□ Change
Treasurer	Michael Dear	2734 CAUSEWAY CENTER DRIVE	= Add
		TAMPA, FL 33619	□Remove
		<u> </u>	Change
AMBR	David Witsken	2734 CAUSEWAY CENTER DRIVE	≣ Add
		TAMPA, FL 33619	□Remove
			□Change

DocuSign Envelope ID: 297CD9B2-5052-4F40-80C2-DB1D349701E5 in amending Authorized rerson(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
AMBR	Gary Elzweig	2734 CAUSEWAY CENTER DRIVE	≣ Add
		TAMPA, FL 33619	□ Remove
			Change
			🗀 Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			DAdd
			Remove
			□Change
			□Add
			□Remove
			☐ Change
			□ Add
			🗀 Remove
			☐Change

If amending any other infor	mation, enter change(s) here: (Attach additional sheets, if necessary.)
<u></u>	· · · · · · · · · · · · · · · · · · ·
	
If an effective date is listed, the date r	he date of filing:
rd is filed.	rtive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
July 7 Dated	2023 esfield Signature of a member or authorized representative of a member
DocuSigned by:	ulidd
BESFERASOFECIAS	Signature of a member or authorized representative of a member
	regiment of a memory of authorities representative of a memor
Benjamin Butterfield	

Filing Fee: \$25.00