L23000188974

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COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

Division of Cor	perations		
Clearwater	Fabrication, LLC		
SUBJECT:	Name of Lim	ited Liability Company	***************************************
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Allison Lutich Pivec		
		Name of Person	
	Clearwater Fabrication LL	c	
	Clearwater Paprication LL	<u></u>	
		Firm/Company	
	4200 114th Terrace North		
		Address	
	Clearwater, Fl. 33762		2023 OCT 17 PH 12: 40
		City/State and Zip Code	——————————————————————————————————————
	pwfhomes@gmail.com		
		to be used for future annual report notifi	eation)
For further information c	oncerning this matter, please co	all:	PH 12: 40
Allison Lutich Pivec		727 612-0245 at ()	0.4
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	he 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		Street Address:	
Registration 5		Registration Section of Com	
Division of C P.O. Box 632		Division of Corp The Centre of Ta	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Clearwater Fabrication LLC			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our r Liability Company)	ecords.)	
The Articles of Organization for this Limited Liability Company			and assigned
Florida document number L3000188974			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
Clearwater Rebar LLC		<u>.</u>	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company." the designation	"LLC" or the abbrev	iation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			203
	Same as above		0 0
			コ 発記
Enter new mailing address, if applicable:			7 708
(Mailing address MAY BE A POST OFFICE BOX)	Same as above		PH 12
printing unaress 1971 1027(1001 0171 02 2019			72: 4
			Ö
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, y	enter the name <u>o</u>	the new registere
Name of New Registered Agent:			<u></u>
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
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			Remove
			Change
			□ Remove
			Digital Figure Con Control of Con
			7. F. L. C.
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i effective date is listed, the term of the date inserted in							
cument's effective date o	n the Department of	of State's record	s	C (
ecord specifies a delayed is filed.	effective date, but	not an effective	time, at 12:01 a.r	n, on the earlier of	1 (b) The 90th d	ay after	the
	- 1	2023					
ted October 9	$-\mathcal{N}$	_ '					

Typed or printed name of signee