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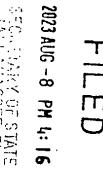
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Seans Land Survice + Name of Limited Liability Company	Demolition L
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Seal Mclaughlin	
Sean's Land Service 41	Semolition (CC
2851 NW US HWY. 2	7
Chiefland Fc. 326 City/State and Zip Code	26
E-mail address: (to be used for future annual report notify	fidation)
For further information concerning this matter, please call:	
	e Telephone Number
Enclosed is a check for the following amount:	,
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Street Address:	

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

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

Seans Land Servi (Name of the Limited Liability Compan (A Florida Limited Li	v as it now appears on our records.)
The Articles of Organization for this Limited Liability Company of Florida document number <u>L23000 2290</u>	were filed on $5-9-2023$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and contain the words "Limited Liabilit Enter new principal offices address, if applicable:	y Company," the designation "LLC" or the abbreviation "L.L.C."
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	AUG-8 PH 4: 16
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	Idress on our records, <u>enter the name of the new register</u>
Name of New Registered Agent: SQC	
New Registered Office Address: 285	NW US HWY 27

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 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.

Changing Registered Agent Signatur of New Registered Agent

Enter Florida street address

Chiefiand Florida 32626

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
MGR	Larry DeNyle	407 Debra St Inglis Fl. 34449	□Add
	•	1-ng1.5 +c. 39499	Remove
			□Change
		□Add	
			Remove
			□ Change
			□Add
		□Remove	
			□ Add
		- 	Remove
			🗀 Add
		□Remove	
			□Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(1 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Dated / Hugust D4