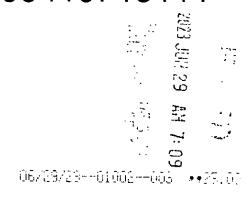
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COVER LETTER

	gistration Sect vision of Corp				
SUBJECT:		ontracting Group, LLC			
SUBJECT		Name of Limi	ted Liability Company		
The enclosed	d Articles of A	mendment and fee(s) are sub-	nitted for filing.		
Please return	n all correspon	dence concerning this matter (to the following:		
		Heidi Dempsey			_
			Name of Person		
		Milestone Contracting Grou	up, L1.C		
			Firm/Company		
		6 East Bay Street Suite 600	ı		
			Address	 	
		Jacksonville, FL 32202			
		hdempsey@liveoakcontracti	City/State and Zip Coing.com	ode	
		E-mail address: (t	o be used for future ann	ual report notification)	
For further i	nformation co	ncerning this matter, please ca	ill:		
Heidi Demp	osey		916 at ()	832-7548	
	Name of	Person	Area Code	Daytime Teleph	one Number
Enclosed is	a check for the	following amount:			
■ \$25.00	Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing For Certified Copy (additional copy is	•	\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	ulling Address egistration So			t Address: stration Section	

Registration Section 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Milestone Contracting Group LLC

2023 JUH 29 AM 7: NO

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

`	imited Liability Company)		i gran
The Articles of Organization for this Limited Liability Cor	npany were filed on 6/6/2023	·	and assigned
Florida document number L23000273801	,		
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limite</u>	ed liability company here:		
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designati	on "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	<u>(SS)</u>		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			
	 		
B. If amending the registered agent and/or registered (office address on our records	, <u>enter the na</u>	me of the new regist
agent and/or the new registered office address here:			
N			
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida stre	at addrage	
	rmer e tortaa mre		
	City	, Florida _	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>	<u>Address</u>	Type of Action
MGR	John Paul Bertozzi	100 North Laura Street, Suite 900	
		Jacksonville, Fl. 32202	= Remove
MGR	John J. Murphy III	6 East Bay Street. Suite 600	≣ Add
		Jacksonville, FL 32202	□Remove
			□Change
	 		🗀 Add
			□Remove
		-	Change
			□Add
			🗀 Remove
			□Change
			Remove
			□Change
			□Add
			□Remove
			Change

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 605.02. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. 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 date of filed. Signature of member or authorized representative of a member.							
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	John Paul Bertozzi		Typed or printe				

Filing Fee: \$25.00