L 23000 Z9104'.

(Requestor's Name)
(Address)
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Docusign Envelope ID: BDCDB31F-D62A-4456-8D83-129FFD36BA63 COVER LETTER

Division of	on Section Corporations					
	IDA FRAMING SERVICES LLC					
SUBJECT.	Name of Lim	nited Liability Company				
The enclosed Article	es of Amendment and fee(s) are sub	omitted for filing.				
Please return all corr	respondence concerning this matter	to the following:				
	May Gonzalez					
		Name of Person				
	MGR Accounting LLC					
	-	Firm/Company				
	4129 Targee Ave					
		Address				
	North Port FL 34287					
		City/State and Zip Code				
	may@mgraccounting.com	to be used for future annual report not	tiration)			
12 and the same for the manual of		Ť	(Teation)			
	on concerning this matter, please co					
May Gonzalez	Gonzalez 941 4162984 at (
Na Na	me of Person	Area Code Daytin	e Telephone Number			
Enclosed is a check	for the following amount:					
■ \$25.00 Filing Fe	ee ☐ \$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 Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLORIDA FRAMING SERVICES LLC	
(Name of the Limited Liability Compan (A Florida Limited Li	v as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company v Florida document number <u>L23000291047</u>	were filed on $\frac{06/16/2023}{}$ 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	y Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	.)
	· .
Enter new mailing address, if applicable:	<u>_</u>
(Mailing address MAY BE A POST OFFICE BOX)	
	• 5
B. If amending the registered agent and/or registered office adagent and/or the new registered office address here:	ldress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Florida

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.

City

Zip Code

Docusign Envelope ID: BDCDB31F-D62A-4456-8D83-129FFD36BA63 11 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	ARIEL, BEYONCE	21042 IONIA AVE	□Add
		PORT CHARLOTTE, FL 34287	≣Remove
			□Change
AMBR	Carranza, Hermelindo	21042 IONIA AVE	
		PORT CHARLOTTE, FL 34287	□Remove
			Change
			
			□Remove
			□Change
			□ Add
		<u> </u>	□Remove
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ote: If	e date, if other than the date ive date is listed, the date must be so the date inserted in this block dates effective date on the Department	loes not meet the applicable	(optionale of filing or more than 90 days after filing statutory filing requirements, this days	d) ng.) Pursuant to 605.0207 ite will not be listed as
record s is filed.		e, but not an effective time, a	at 12:01 a.m. on the earlier of: (b)	The 90th day after the
Ated	ugust 15	2024		
	DocuSigned by:	··	Signed by:) <i>(</i>
	Beyonce Aricl		(17C) TRC	<u> </u>
				27
		ature of a member or authorized	representative of a member	27

Filing Fee: \$25.00