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COVER LETTER

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
SUBJECT: Whites Quality Company Subject: Whites Quality Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jeffrey V. White
Whites Quality Construction LA
11751 SE 21St PL
Morriston, FL. 32/eles State and Zip Code Substitute 2800 E Janoo Company E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jeffrey White at 357 414-84525 Name of Person Area Code Daytime Telephone Number in 5
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporations Street Address: Registration Section Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{4-24-23}{}$ and assigned Florida document number <u>L230003549913</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 7 B. If amending the registered agent and/or registered office address on our records, enter the named of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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
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		Signature of a	i member or auti	iorized represent	ative of a memoc			