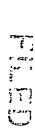
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COVER LETTER

Division of Co			
RyGunn C	Construction, LLC		
SUBJECT:	Name of Lin	aited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all correspond	ondence concerning this matter	to the following:	
	Ty O. Bowling		
		Name of Person	-
	DBOW Properties, LLC		
	•	Firm/Company	-
	22055 Penn Avenue		
		Address	-
	Lakeville, MN 55044		
		City/State and Zip Code	
	rygunntrucking@gmail.com		730
	E-mail address: (to be used for future annual report notification)	OEC -
For further information of	concerning this matter, please co	all:	福
Ty O. Bowling		612 716-0191 at ()	2023 DEC 18 PM 2: 24 SEALL MANSSEE, FL
Name o	of Person	Area Code Daytime Telephone Number	2 : 5
4.5	••		一一一
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	te of Status &
Mailing Address Registration S Division of C P.O. Box 632	Section Corporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RYGUNN CONSTRUCTION, LLC

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

In for this Limited Liability Company were filed on OCTOBER 6, 2023

The Articles of Organization for this Limited Liability Company were filed on OCTOBER 6, 2023 and assigned

Florida document number L23000461318

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" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

	111
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address

City

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 Changing Registered Agent, Signature of New Registered Agent

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

Title	<u>Name</u>	Address	Type of Action
MGR_	SCOTT HURM	22055 PENN AVENUE	≅ Add
		LAKEVILLE, MN 55024	[]Remove
			□ Change
			□Add
		 	□Remove
			☐ Change
			S CREMOVE TO THE STATE OF THE S
			SSEE FLEDAR
			□Remove
			☐ Change
			
			□Remove
			☐ Change
			□Add
			Remove
			□Change

Page 2 of 3

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Effective date, if other than the date of filing:	(optional)	4.1
f an effective date is listed, the date must be specific and cannot be prior to date of filing or more t Note: If the date inserted in this block does not meet the applicable statutory filing re-	than 90 days after filing.) Put quirements, this date will	suant to 605.0207 (I not be listed as t
document's effective date on the Department of State's records.	•	
ne record specifies a delayed effective date, but not an effective time	e, at 12:01 a.m. on	the earlier of:
The 90th day after the record is filed.		
2023		
Dated		
To the state of th		
Signature of a member or authorized representative of a	ı member	
Signature of a member or authorized representative of a	n member	

Page 3 of 3

Filing Fee: \$25.00