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COVER LETTER

Tallahassee, FL 32314

): Registration Se Division of Cor				
ЈВЈЕСТ:	erook Constru	ction CC		
	Name of Limi	ted Liability Company		
ne enclosed Articles of	Amendment and fee(s) are subr	mitted for filing.		
ease return all correspo	ondence concerning this matter t	to the following:		
	Dylan	De Cook Name of Person		
		Name of Person		
	Deroon (Construction L	SECRETARY OF SIATURE OF STALL AHASSEE. FL	il
	2981 Pineas	pple Aue.	ARY OF] ;;;}
	Melbourne.	F1 32935 City/State and Zip Code	West of the second of the seco) 3
				
•	<u>dylan</u> e E-mail address: (t	derook@smail.	COM iffication)	
or further information c	concerning this matter, please ca	ail:		
Dylan D)erook	at (305) 216	5047	
Name o	f Person	Area Code Daytir	ne Telephone Number	
nclosed is a check for the	he following amount:			
\$25.00 Filing Fee	☐ \$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)	I
Mailing Addres		Street Address:		
Registration : Division of C		Registration Se Division of Co		
P O Boy 632	•	The Centre of	•	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Derook Construction	
(Name of the Limited Liability Compa (A Florida Limited L	inv as it now appears on our records.) Liability Company)
ne Articles of Organization for this Limited Liability Company	were filed on $\frac{02 05 2024}{}$ and assigned
orida document number <u>L 24 0000 64946</u>	·
nis amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liab	pility company here:
e new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	<u>S</u> 78
nter new mailing address, if applicable: Aailing address MAY BE A POST OFFICE BOX)	ARETARY OF SE
. If amending the registered agent and/or registered office a	address on our records, enter the name of the new register
gent and/or the new registered office address here:	address on our records, enter the name of the new registery
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	. Florida
	City Zip Code

iew Registered Agent's Signature, if changing Registered Agent:

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 peing 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

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:

GR = Manager

MBR = Authorized Member

itle	<u>Name</u>	Address	Type of Action
6R	Dylan Derook	2981 Pincapple Ave Helbourne, Fl 32935	X ladd
		Helbourne, Fl 32935	□Remove
			□Change
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ctive date, if other than the date of filing:	(optional)	
effective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of filing or more If the date inserted in this block does not meet the applicable statutory filing rement's effective date on the Department of State's records.	than 90 days after filing.) Pursuant to 605.0	207 I as
ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on filed.	the earlier of: (b) The 90th day after t	the
d 11 03 2024		
Dylan ell Rook Signature of a member or authorized representative of	···	