Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : ZENBUSINESS INC. Account Number : I20230000190 Phone : (844)449-3624 Fax Number : (512)597-0678

rax (vulliper . (312)397-0078

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN B&T UTILITY SERVICES LLC

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COVER LETTER

	egistration Se division of Cor					
en bucca	B&T Utility	y Services LLC				
SUBJECT	``	Name of Lim	ited Liability Company			
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please retu	irn all correspo	ndence concerning this matter	to the following:			
		Allison Monzon				
			Name of Person		-	
		ZenBusiness INC				
			Firm/Company		-	
		336 E. College Ave Suite	301		40 F	J
			Address		, 48, 21, 2	2
		Tallahassee, FL 32301				9091. HH
		fulfillment@zenbusiness.co	City/State and Zip Code		0.	o i
			to be used for future annual report notifica	ation)	1,00 G	<u>ئ</u> ا
For further	r information c	oncerning this matter, please c	all:			, N
c/o ZenBi	usiness INC		844 493-6249			
	Name o	f Person	Area Code Daytime T	elephone Number	r	
Enclosed is	s a check for th	ne following amount:				
■ \$25.00) Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Status &	
R D P	Lailing Address Registration Solivision of Co. Box 632 'allahassee, I	Section forporations 7	Street Address: Registration Secti Division of Corpo The Centre of Tal 2415 N. Monroe S Tallahassee, FL 3	orations Tahassee Street, Suite 8	310	

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

B&T Utility Services LLC		
(Name of the Limited Liability Company (A Florida Limited Lia	y as i <mark>t now appears on our rec</mark> ord ability Company)	<u>(ds.)</u>
The Articles of Organization for this Limited Liability Company were tiled on 2024-03-19 and		
Florida document number L24000135166		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liabili</u>	ity company here:	
be new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LL.	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		20 <u>2</u>
Enter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		100 70 111
		To ↓
		Z 25
 If amending the registered agent and/or registered office adegent and/or the new registered office address here: 	ldress on our records, <u>enter</u>	r the name of the new registo
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	255
	471	Torida

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Carson Todd Jernigan	3975 Juanita St Cocoa, Fl. 32927	□Add
			≣Remove
			Change
			□Remove
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□Add
			□Remove
			☐ Change
			Remove
			□ Change

D. If amending any other infor	mation, enter change(s) here: (Attach additional sheets, if necessary	v.)
		
	· · · · · · · · · · · · · · · · · · ·	
		
		
		
(If an effective date is listed, the date in Note: If the date inserted in this	the date of filing:) Pursuant to 605.0207 (3)(
If the record specifies a delayed effect record is filed.	ctive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) Th	e 90th day after the
Dated 07/30	. 2024	
/s/ Brandon	n Barfield Signature of a member or authorized representative of a member	
Brandon Barfield, A		
	Typed or printed name of signee	

Filing Fee: \$25.00