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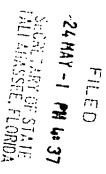
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## **COVER LETTER**

TO:

Tallahassee, FL 32314

TO: Registration S Division of Co			
alle le cor	ding West, LLC		
SUBJECT:	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
	ondence concerning this matter	·	
	Mark Masterson		
		Name of Person	
	Rapid Building Solutions,	LLC	
	<del></del>	Firm/Company	
	9000 W. Colonial Dr. STE	401	
	<del></del>	Address	
	Ocoee, FL 34761		
		City/State and Zip Code	
	E-mail address: (	to be used for future annual report notif	Teation)
For further information	concerning this matter, please c	all:	
Eleanor Didio		407 347-9614	
Name	of Person	at () Area Code Daytime	: Telephone Number
Enclosed is a check for	the 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)
Mailing Addre Registration		Street Address: Registration Sec	tion
•	Corporations	Division of Cor	porations
P.O. Box 63	27	The Centre of T	allahassee

2415 N. Monroe Street, Suite 810

Tallahassee. FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Rapid Building West, LLC		
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our record Liability Company)	<u>s.</u> )
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L24000167131}{L24000167131}$ .	y were filed on 4/8/2024	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	bility company here:	
Rapid Buildings West, LLC		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		
		ST. B. S.
Enter new mailing address, if applicable:		SI S
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter	the name of the new registere
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres	·s
	171	orida
<del></del>	, r.i.	orida
New Registered Agent's Signature, if changing Registered Agent	<b>:</b>	
	<del>-</del>	

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
			□Add
			□ Remove
			□Change
			□Add
			□Remove
			□ Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
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			□Change
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			□Remove
			[] Change

(If an e Note:	tive date, if other than the date of filing:
he reco	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.
Dated	April 25 2024
	Signature of a member or authorized representative of a member
	Name of a manufactor of an active a factor of a manufactor
	Mark Masterson

Filing Fee: \$25.00

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

y as it now appears on our recor- ability Company)	<u>ls.</u> )
vere filed on 4/8/2024	and assigned
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ty Company," the designation "LL	C" or the abbreviation "L.L.C."
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	ity company here:  Ty Company." the designation "LLA

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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
			Remove
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fan effectiv <u>Note:</u> If t	date, if other than the date of filing:	
	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t	he
d is filed.  Dated	April 25 2024	
	Signature of a member or authorized representative of a member  AA	
	Mark Masterson  Typed or printed name of signee	

Filing Fee: \$25.00