L24000196118

| (Re | questor's Name) | |
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| | dress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nam | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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| TO: | Registration Se Division of Cor | | | |
|----------------|------------------------------------|---|---|--|
| CHDIE | | ality Coatings LLC | | |
| SUBJE | C1: | Name of Lim | ited Liability Company | |
| The enc | losed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please r | eturn all correspo | endence concerning this matter | to the following: | |
| | | Lucas D Carter | | |
| | | | Name of Person | |
| | | | Firm/Company | |
| | | 32141 Northridge Drive | | |
| | | | Address | |
| | | Wesley Chapel, FL 33545 | | |
| | | · · | City/State and Zip Code | - |
| | | Cartersqualitycoatingsllc@d | outlook.com | |
| | | E-mail address: (1 | to be used for future annual report notif | fication) |
| For furt | her information co | oncerning this matter, please ca | all: | |
| Lucas E | O Carter | | 352 232-1903 at () | |
| | Name of | Person | Area Code Daytime | e Telephone Number |
| Enclose | d is a check for th | e following amount: | | |
| ≘ \$ 25 | .00 Filing Fee | S30.00 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 Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Carters Quality Coatings LLC | | |
|---|---|--------------------------------|
| (<u>Name of the Limited Liabil</u> (A Florid | ity Company as it now appears on our record a Limited Liability Company) | <u>(s.</u>) |
| The Articles of Organization for this Limited Liability C | Company were filed on 04/26/2024 | and assigned |
| Florida document number L24000196118 | <u>_</u> . | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the lim | aited liability company here: | |
| The new name must be distinguishable and contain the words "Lin | nited Liability Company," the designation "LLC | " or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | |
| <u> Principal office address MUST BE A STREET ADDI</u> | RESS) | |
| | | |
| | | |
| Enter new mailing address, if applicable: | | |
| Mailing address MAY BE A POST OFFICE BOX) | | |
| | - | |
| | | |
| B. If amending the registered agent and/or registere | d office address on our records, <u>enter</u> | the name of the new registe |
| gent and/or the new registered office address here: | | |
| | | |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida street address | s |
| | | orida |
| | City | Zip Code |

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

1 6 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 |
|--------------|----------------|-------------------------|-----------------|
| MGR | Lucas D Carter | 32141 Northridge Drive | |
| | | Wesley Chapel, FL 33545 | |
| | | | ≡ Change |
| MGR | Lee D Carter | 32141 Northridge Drive | = Add |
| | | Wesley Chapel, FL 33545 | □Remove |
| | | | □Change |
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| ffective date, if other than the date must be an effective date is listed, the date must be be a list of the date inserted in this block ocument's effective date on the Dep | e specific and car k does not mee | t the applicable | date of filing or me e statutory filing | ore than 90 days af | otional) der filing.) Porsua his date will no | unt to 605.0207 (ot be listed as th |
| record specifies a delayed effective I is filed. | date, but not an | effective time. | , at 12:01 a.m. c | on the earlier of: | (b) The 90th | day after the |
| October 23 | | 2024 | | | | ~ 3 |
| | Auser. | 5/1 | | | | 2024 OCT \$55/4/ |
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| S | gnature of a men | uber or authorize | ed representative | of a member | | CT 28 |

Filing Fee: \$25.00