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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT:	R 4 WW Co	nstruction]] ited Liability Company	THC
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	Ry	Name of Person	
	120	Firm/Company GORDOW WA	:/kinson Rd
	Palat Lisa@g E-mail address: (1	City/State and Zip Code City/State and Zip Code Cod Proportion To be used for future annual report notified	177_ entropy com
For further information co	ncerning this matter, please ca	all:	
Ryan W	ilkinson Person	at (386) 972 Area Code Daytime	-8625 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 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

K+WW Cons	ruction	11-66
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears (ability Company)	on our records.)
The Articles of Organization for this Limited Liability Company of	were filed on	5/2/24 and assigned
Florida document number 1240000544.	·	/ / / s
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here	;
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the desi	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	- <u>-</u> .	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
R. If amending the registered agent and/our mid-		
B. If amending the registered agent and/or registered office ad agent and/or the new registered office address here:	ldress on our reco	ords, enter the name of the new regi
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address:	Enter Florida	street address
New Registered Office Address:	Enter Florida	
New Registered Office Address:	Enter Florida City	street address, Florida Zip Code

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 = Mar AMBR = Aut	nager horized Member		
Title	Name	Address	Type of Action
MGR	Lisa Sadler-Mar	stall 120 Goedon Wilkins	Z d □ Add
		Address Lal/ 120 Gordon Wilkins Palatta FL 32/77	Remove
			□Change
MGR	Ryanwilkinson	120 Cordon Wilkinson Re Palatka, FL 32177	Add
	,	Palatka, FL 32177	□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			Change
			□Add
			Remove
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			DAdd ==
			Remove
			□Change

			
			
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- Footing	Into if other than the day of GV		
f an effective	late, if other than the date of filing: (option e date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after file date inserted in this block does not more than applicable account.	t al) ling.) Pursuant to 605.6	0207
··•	te date inserted in this block does not meet the applicable statutory filing requirements, this diseffective date on the Department of State's records.	late will not be lister	d as
	enteente date on the Department of State's feedigs.		
record so	erifies a delayed affective data but make a first of the land of t		
	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b)	The 90th day;after	the.
d is filed.		2	• •
d is filed.			
a is mea.	5/16 2024		- t
a is mea.	5/16 204		<u>- c</u>
a is mea.	5/16 204		
d is filed. Dated	Signature of a member or authorized representative of a member		4:07.1 2.4

Filing Fee: \$25.00