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| | Division of Corporations | |
| | Fax Number : (850)617-6383 | |
| From: | | All iss |
| | Account Name : LEGALZOOM.COM INC. | |
| | Account Number : I20010000062 | |
| | Phone : (323)962-8600 | ســـ سر |
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KILLIAN CONTRACTING LLC

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COVER LETTER

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| SUBJEC | ـا: <u>ـ</u> | | · Name of Lin | nited Liability Compan | у . | | • | |
| The enci | osed A | rticles of A | amendment and fee(s) are sub | omitted for filing. | | | · | · |
| Please re | etu rn all | correspon | dence concerning this matter | to the following: | : | | | t je s |
| | | | Mike Town | • | | | | |
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| | - | | Legalzoom.com, Inc. | | | | | |
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| | | | | Address | | | | |
| | , | | Austin, TX 78717 | ٠. | | | | ٠,٠ |
| - | | | killiancontractinglle@gmai | City/State and Zip (| Code | | ; . | |
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| | | шаноп со | ncerning this matter, please c | an: 800 | 773-0888 | | • . | |
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| | | | see, F1. 32314 | 266 | ton Building 1 Executive Center ahassee, FL 32301 | | | |

To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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| TALLANIASSEE FLORIGE | |
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KILLIAN CONTRACTING LLC

| (Name of the Limited Liability Compa (A Florida Limited I | ny as it now appears on our records.) Liability Company) | | | | | |
|--|--|--|--|--|--|--|
| The Articles of Organization for this Limited Liability Company Florida document number 1.24000289804 | were filed on $\frac{06/26/2024}{}$ and assigned | | | | | |
| This amendment is submitted to amend the following: | • | | | | | |
| A. If amending name, enter the new name of the limited liab | ility company here: | | | | | |
| The new name must be distinguishable and contain the words "Limited Liabil | lity Company," the designation "LLC" or the abbreviation "L.L.C." | | | | | |
| Enter new principal offices address, if applicable: | 13711 MESSINA LOOP UNIT 103 | | | | | |
| (Principal office address MUST BE A STREET ADDRESS) | BRADENTON, FL 34211 | | | | | |
| | | | | | | |
| Enter new mailing address, if applicable: | 13711 MESSINA LOOP UNIT 103 | | | | | |
| (Mailing address MAY BE A POST OFFICE BOX) | BRADENTON, FL 34211 | | | | | |
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| · | | | | | | |
| B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here | | | | | | |
| Name of New Registered Agent: | · · · · · · · · · · · · · · · · · · · | | | | | |
| New Registered Office Address: | | | | | | |
| | Enter Florida street address | | | | | |
| · · · · · · · · · · · · · · · · · · · | City Zip Code | | | | | |
| | | | | | | |
| New Registered Agent's Signature, if changing Registered Agent; | | | | | | |
| I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change. | performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is | | | | | |

Page: 05 of 11

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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:

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