L24000387013

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COVER LETTER

TO:	Registration S Division of Co							
SUBJE	CT: Spe	Cialty Production	cts and Resould	es, Lle				
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.					
Please re	eturn all correspo	ondence concerning this matter	to the following:					
		MICHAEL	McCutcheon Name of Person	<u></u>				
		Specialty Y	Products and Reso	ources, LLC				
4270 NE 29+ PL Address								
			Address	2024 OCT - 1 PM 3: 45				
		Ocala FL	34470	OCT				
			3447c City/State and Zip Code					
		Mikemacue	to be used for future annual report notif	00 2				
				ication) بي				
For furth	er information c	oncerning this matter, please co	all:	三 5				
MICH	all Mil	atchrew	a1(352) 642	11680				
	Name o	f Person	at (352) 642 Area Code Daytime	Telephone Number				
Enclosed	is a check for th	e following amount:						
▼ \$25.0	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 S Division of Co P.O. Box 632 Fallahassee, F	ection orporations 7						

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Special Ty Products a (Name of the Limited Liability Comp (A Florida Limited	nd Reoule	5, LLC			
(Name of the Limited Liability Comp (A Florida Limited	Liability Company)	our records.)			
The Articles of Organization for this Limited Liability Company	y were filed onSe	pt 4	Zu2 Yand assigned		
Florida document number <u>L 24000 38701</u> 3					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited lial	bility company here:				
Specialty Products and Rescu The new name must be distinguishable and contain the words "Limited Liab	ices, LLC				
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the design	ation "LLC" or	the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)			024		
	-		7024 DCT		
			1		
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)			िं य		
			75 5		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our record	ds, <u>enter the</u>	name of the new registere		
agent and/or the new registered office address here:					
Name of New Registered Agent:					
Name of the Wingsstered Agent.	-				
New Registered Office Address:	C . C . V				
	Enter Florida street address				
	Ch	, Florid	aZip Code		
	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

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
Prys	Michael Mica tchron	4270 NE 2914 PL Ocala, ME	7447€ □Add
			□Remove
			□Change
			🗖 Add
			□Remove
			Change
		データン (A)	SAdd II
		্ত্র নেন্ নেন্	Change Change Change Change Change Change
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			□Remove
			_ □Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: _______(optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 Kb) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record 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 record is filed. Signature of a member or authorized representative of a member Michael McLutcheon
Typed or printed name of signee

Filing Fee: \$25.00