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From:

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN KRF CARPENTRY LLC

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Registration Section

TO:

COVER LETTER

Divi	ision of Corpo	orations		
SUBJECT:	KRF CARPE			
SCIVIC I.			ted Liability Company	
The enclosed	Articles of A	mendment and fec(s) are subn	nitted for filing.	
Please return	all correspond	dence concerning this matter to	o the following:	
		Mike Town		
			Name of Person	
		Legalzoom.com, Inc.		
			Firm/Company	
		9900 Spectrum Dr		
			Address	
		Austin, TX 78717		
			City/State and Zip Code	
		E-mail address: (te	be used for future annual report	notification)
For further in	formation con	cerning this matter, please cal	II:	
Mike Town			800 773-088	8
	Name of F	Person	at () Area Code Da	ytime Telephone Number
Enclosed is a	check for the	following amount:		
□ \$25.00 F	iling 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/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

From: Malike Lacy

Page: 4 of 6

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KRF CARPENTRY LLC (Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(A Florida Limited Liability Company)

(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{9/26/2024}{}$ Florida document number L24000419286 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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:

2024-11-13 12:23:07 PST

MGR = Manager AMBR = Authorized Member

Ta:

<u>Title</u>	Name	<u>Address</u>	Type of Action
AMBR	Steven Alvin Carter	8160 Carl Dean St Pensacola, FL 32514	≅ Add
			Remove
			☐ Change
			
			Remove
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2024-11-13 12:23:07 PST

LegalZoom com, Inc.

From: Malika Lacy

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The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier egoth day after the record is filed.	of:
Dated	October 21, 2024 Signature of a member or authorized representative of a member	
	Andr	
	Signature of a member or authorized representative of a member	

Page 3 of 3

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