## 124000482007

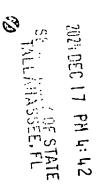
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## **COVER LETTER**

	egistration Sec vision of Corp				
SUBJECT		ssure washing LLC			
SUBJECT	:	Name of Lim	ited Liability Company	<del></del>	
The enclose	ed Articles of A	mendment and fee(s) are sub	omitted for filing.		
Please retui	n all correspon	dence concerning this matter	to the following:		
		Bobby Ethan Posey			
		· · · · · · · · · · · · · · · · · · ·	Name of Person		
		Big Bend pressure washing	g LLC		
			Name of Person  Ing LLC  Firm/Company  Address  City/State and Zip Code  (to be used for future annual report notification)		
		191 Maplewood Drive			
			Address		
		Crawfordville Florida 323	27		
			City/State and Zip Code		
		E-mail address: (	to be used for future annual report n	otification)	
For further	information cor	ncerning this matter, please c	all:		
	<u> </u>		at ()		
<b>.</b>	Name of I		Area Code Dayt		2024 D
		following amount:			()
\$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status Certified Copy-n	71500

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

Big Bend pressure washing LLC	
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our records.) Jability Company)
The Articles of Organization for this Limited Liability Company Florida document number 1.24000482007	were filed on November 14, 2024 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	ility company here:
Posey&son construction LLC	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the abbreviation "L.L.C."
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 a agent and/or the new registered office address here:	iddress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address Florida
New Registered Agent's Signature, if changing Registered Agent:	City Cond.
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being 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 so provided for in Chapter 605, F.S. Or, IL this document is

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
<del></del>			□Add
			□Remove
			□Change
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			□Add
			□Remove
			□Change

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