## L25 000 223 240

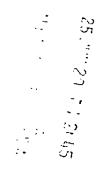
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

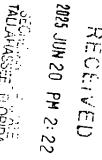
Office Use Only



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## **COVER LETTER**

	Registration So Division of Co			
SUBJEC	Roughcut I	Recon, LLC		
30137.0	·	Name of Lit	nited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are su	bmitted for filing.	
Please retu	ım all correspo	ondence concerning this matter	r to the following:	
		Lex W. Hughes, Jr.		
			Name of Person	<del></del>
		Roughout Recon, LLC		
			Firm/Company	<del></del>
		5607 Coastal Hwy		
		· · · · · · · · · · · · · · · · · · ·	Address	<del></del>
		Crawfordville, FL 32327		
			City/State and Zip Code	<u> </u>
		roughcutrecon@outlook.co		
For further	information co	oncerning this matter, please c	to be used for future annual report notificall.	cation)
Lex Hughe		one chang this matter, prease c		
—————			850 445-5383 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is	a check for th	e 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)
	ailing Address egistration S		Street Address: Registration Sect	ion

**Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

**Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Roughout Recon, LLC		
( <u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our records. a Limited Liability Company)	
The Articles of Organization for this Limited Liability (	Company were filed on 5/12/2025	and assigned
Florida document number L25000223240		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the lim	nited liability company here:	
		25.
he new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
		22
nter new principal offices address, if applicable:		<del></del>
<u> Principal office address MUST BE A STREET ADDI</u>	RESS)	
		5.0
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·
The second secon		<del></del>
. If amending the registered agent and/or registered gent and/or the new registered office address here:	d office address on our records, <u>enter th</u>	e name of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	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 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
MGR	Lex W. Hughes, Jr	5607 Coastal Hwy, Crawfordville, Fl. 32327	□ Add
			□Remove
			Change
AMBR	Carrie Hughes	5607 Coastal Hwy, Crawfordville, FL 32327	□Add
			□Remove
			Change
	<del></del>		
			□ Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

	ormation, enter change(s) here: (Attach additional sheets, if necessar	,,
		<u> </u>
<del></del>		<del></del>
		<del></del>
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		<del>_</del>
		<u> </u>
<del></del>	<del>-</del>	
E. Effective date, if other than	the date of filing:	
(If an effective date is listed, the dat Note: If the date inserted in the	the date of filing:	Pursuant to 605.0207 (3) will not be listed as the
If the record specifies a delayed eff record is filed.	ective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The	e 90th day after the
Dated	2025	
- 11 2	Signature of a member or authorized representative of a member	
17-7 /V /7	Signature of a member or authorized representative of a member	<del></del>
Lex W. Hughes, Jr.		