M21000003410

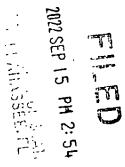
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| PICK-UP WAIT MAIL |
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| Special Instructions to Filing Officer: |
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

| 1. Name of limited liability Company as it appears o | | Department of |
|--|-------------------------------|--|
| State: Independence Construction Mid-Atlantic, LL | C | |
| Enter new principal office address, if applicable: | | |
| (<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>) | | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | LAHASS |
| The Florida document number of this limited liabil | ity company is: M210000034 | r. |
| Jurisdiction of its organization: | | |
| 4. Date authorized to do business in Florida: $\frac{3/24/20}{1}$ | 21 | - |
| SECTION II (5-9 complete only the applicable cha | inges) | |
| New name of the limited liability company: (must co | ontain "Limited Liability Cor | npany, " "L.L.C.," or "LLC.") |
| (If name unavailable, enter alternate name adopted fo copy of the written consent of the managers or managmust contain "Limited Liability Company," "L.L.C." | ing members adopting the al | ousiness in Florida and attach a ternate name. The alternate name |
| 6. If amending the registered agent and/or registered or registered agent and/or the new registered office addr | | s, enter the name of the new |
| Name of New Registered Agent: | | |
| New Registered Office Address: | Enter Floride | a Street Address |
| | 2.ne. 1 10/141 | |
| | City | , Florida 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.

| itle/ Capacity | Name | Address | Type of Action |
|----------------|--|--|----------------|
| | DIGERONIMO, KEVIN | 5720 SCHAAF ROAD | |
| | | INDEPENDENCE, OH 44131 | ≣Rem |
| IEM | DIGERONIMO, ROBERT D | 5720 SCHAAF ROAD | — Dyda |
| | | INDEPENDENCE, OH 44131 | ■Rem |
| ЕМ | DIGERONIMO, RICHARD M | 5720 SCHAAF ROAD | □Add |
| | | INDEPENDENCE, OH 44131 | ≅ Rem |
| GR | DIGERONIMO, VICTOR E. JR | 5720 SCHAAF ROAD | □Add |
| | | INDEPENDENCE, OH 44131 | ■Rem |
| ЕМ | Independence Construction, LLC | 5720 SCHAAF ROAD | ∃ Add |
| aforemention | n certificate, if required: no more than 9 ned amendment(s), dúly authenticated bunder the law of which this entity is org | by the official having custody of records in the | □Rem |

Filing Fee: \$25.00