Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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(((H09000257071 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ROBINSON ACCOUNTING SERVICE

Account Number : I20030000126 Phone

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**Enter the email address for this business entity to be used for full ure annual report mailings. Enter only one email address please.*

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

ABOVE THE REST REMODELING, LLC

Certificate of Status	0	
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D. BRUCE

DEC 15 2009

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

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Fax Audit No: (((H09000257071 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

	ABOVE THE REST F	REMODELIN	IG, LLC			
(Na	me of the Limited Liability Compa (A Florida Limited I	ny <u>as it now appe</u> Jability Company)	ars on our records.)	•		
The Articles of Organization	June 28, 2007	and assigned				
Florida document number	L07000068157					
This amendment is submitted	to amend the following:					
A. If amending name, enter	the new name of the limited liab	ility company he	ere:			
The new name must be distingu	ishable and end with the words 'Lim	Ited Liability Comp	pany," the designation "Li	LC" or the abbreviation		
• •	. # # 16 P p 1			26 9		
Enter new principal offices						
IPTINCIPAL OFFICE AGARESS MU	ST BE A STREET ADDRESS)			()		
				——————————————————————————————————————		
F-4	٠٠			EFFS AM 9		
Enter new mailing address,		•••		R≥ 5		
(Mailing address MAY BE A	<u>POST OFFICE BOX)</u>			OA F		
R. If amending the regist.	ered agent and/or registered of	Tica address on	our records onton th	as assure of the sour		
registered agent and/or the	new registered office address her	c:	our records, enter to	ie hanc of the new		
Name of New Rogis	tered Agent:					
New Registered Offi	ce Address:					
Enter Florida street address						
		Florida				
		City		Zip Code		
Now Dordeland Assetts Clause	hana de abana dana rangsa anda anda a					

gistered 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 608, 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

Page 1 of 2

MGR = Manager

Fax Audit No: (((H09000257071 3)))

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGRM = Managing Member **Address** Type of Action <u>Title</u> Name MBR Style T. Coatney **⊘** Add 1921 Danford Ave. Panama City, FL 32405 Remove 🔲 Remove Remove Add Remove ∏Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated 12-11-09

Typed or printed name of signec
Page 2 of 2

Signature of a member or authorized representative of a member David A. Coatney

Filing Fee: \$25.00