# 1000103903

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(Requestor's Name)	
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PICK-UP WAIT MAIL	
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JUL - 9 2009

**EXAMINER** 



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SECRETARY OF STATE

DIVISION OF SO SCRATION

## **COVER LETTER**

TO:	Registration Security Division of Corp					
1		CDC I				
			Holdings LLC		_	
		Name of Entire	ned Liability Company			
The end	closed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please	return all correspon	ndence concerning this matter	to the following:			
		Ne	al B. Shniderman, Esc	٦.		
			Name of Person	-		
Neal B. Shniderman LLC						
			Firm/Company		- <del></del>	
			PO Box 550219			
Address						
	Ft. Lauderdale, FL 33355					
	City/State and Zip Code					
		E-mail address: (1	to be used for future annual repo	rt notification)	_	
For fur	her information co	oncerning this matter, please c	eall:			
	Neal E	3. Shniderman	954 \	370-6999		
Name of Person		Area Code & I	370-6999 Daytime Telephone Num	aber		
Enclose	ed 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 en	Certif closed) Certif	Filing Fee, icate of Status & ied Copy ional copy is enclosed)	

**MAILING ADDRESS:** 

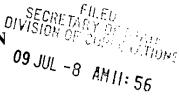
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### STREET/COURIER ADDRESS:

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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

**OF** 



	····· 5(
SPC Holdings LLC	
(Name of the Limited Liability Company as it now appears on our records.)	
(A Florida Limited Liability Company)	

The Articles of Organization for this Limited Liability Compare Florida document number L07000103903	ny were filed on October	12, 2007 and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company here:		
Swimming Pool	Contractors LLC		
The new name must be distinguishable and end with the words "Lir"L.L.C."	nited Liability Company," the de	signation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	Swimming Pool Contractors LLC		
(Principal office address MUST BE A STREET ADDRESS)	4572 N. Hiatus Road		
	Sunrise, FL 33345		
Enter new mailing address, if applicable:	Swimming Pool Contr	actors LLC	
(Mailing address MAY BE A POST OFFICE BOX)	P.O. Box 450609		
•	Sunrise, FL 33345		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address he		ds, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida	a 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 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 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:

MGR = Manager

MGRM = Managing Member <u>Title</u> <u>Name</u> **Address** Type of Action Edward C. Mead MGR 850 S. Military Trail ☐ Add Deerfield Beach, FL 33442 Remove ∏ Add ☐ Remove ☐ Add Remove ☐ Add ☐ Remove ∏Add Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Walter B. Barrett, Manager

Page 2 of 2

Typed or printed name of signee

Filing Fee: \$25.00