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EXAMINER

COVER LETTER

		ition Secti of Corpo			
SUBJEC	ct: GE	EORGE	E SPARLING, CON	NSULTANTS, LLC	
				ited Liability Company)	
The encl	osed Art	icles of A	mendment and fee(s) are sub	mitted for filing.	
Please re	turn all c	correspond	lence concerning this matter	to the following:	
			GEORGE SPARLING		
			• •	(Name of Person)	
		·	GEORGE SPARLING, C	ONSULTANTS, LLC	
				(Firm/Company)	
			15722 Glen Willow Lane		
				(Address)	
			Wellington, FL 33414		
				(City/State and Zip Code)	
Day Coul			namina this matter alongs a	all.	
ror turth	ier inform	nation con	cerning this matter, please ca	aii:	
GEORG	SE SPAF			at (561) 719-0603	
		(Name of	Person)	(Area Code & Daytime To	elephone Number)
			following amount:		
\$25.0	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)
,	~e ~	Registrati Division P.O. Box	G ADDRESS: ion Section of Corporations 6327 cc, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

GEORGE SPARLING, CONSULTANTS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

a. and assigned The Articles of Organization for this Limited Liability Company were filed on March 30, 2009 Florida document number L09000031124 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: GEORGE SPARLING, CONSTRUCTION CONSULTANTS, LLC The new name must be distinguishable and end with the words "Limited Liability 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: (Enter Florida street address) (City) 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 Changing Registered Agent, Signature of New Registered Agent)

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

MGR = Manager

	<u>Name</u>	Address	Type of Action
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April b	2009 21st		
ated April &	1st , 2009) .	

Typed or printed name of signee

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Filing Fee: \$25.00