L09000052687

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

COVER LETTER

TO:

Registration Section

P.O. Box 6327 Tallahassee, FL 32314

Division of Cor	porations				
SUBJECT:	Reel Advanta	ge Construction, LL0			
		ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.			
Please return all correspo	ndence concerning this matter	r to the following:			
		Jeremy Larson	· · · · · · · · · · · · · · · · · · ·		
		Name of Person			
	Reel	Advantage Framing, LL Firm/Company	С		
	2625 Morgan Road				
		Address	·		
		DeLand, FL 32720	and the second s		
	1	City/State and Zip Code			
	E-mail address: (sonpolly@yahoo.com to be used for future annual report	notification)		
For further information co	oncerning this matter, please o	call:			
Mich	nael H. Davis	at ('386)	734-2622		
Name of	Person		ytime 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 enclo	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	NG ADDRESS:		URIER ADDRESS:		
	ation Section of Corporations ox 6327	Registration Se Division of Co Clifton Buildin	rporations		

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Reel Advantage Construction, LLC (Name of the Limited Liability Company as it now appears on our record
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on _____ June 1 , 2009 L09000052687 Florida document number ____ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Reel Advantage Framing, 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

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.

Citv

If Changing Registered Agent, Signature of New Registered Agent

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 = Mar MGRM = M	nager Ianaging Member		
<u>Title</u>	Name	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
	<u> </u>		Add Remove
			Add Remove
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	
			09 JUN -9 AH II
Dated			AMIO: 57 OF STATE
	Signature of a membe	f or authorized representative of a member	
	J. Typed	eremy A. Larson I or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00