

L10000119981

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

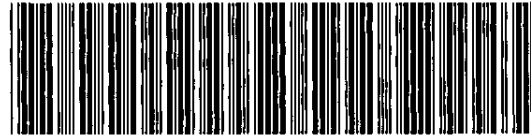
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

D. BRUCE
OCT 30 2012
EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: RCP CONSTRUCTION AND CONSULTING, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KEVIN L. CLEARY

Name of Person

CLEARY BUILDERS, LLC

Firm/Company

117 S. COOK STREET #221

Address

BARRINGTON, ILLINOIS 60010

City/State and Zip Code

kcleary@clearybuilders.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KEVIN L. CLEARY

Name of Person

at (**847**)

987-7123

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 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)

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

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SECRETARY OF STATE
TALLAHASSEE, FL 32301

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

RCP CONSTRUCTION AND CONSULTING, 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 Company were filed on 11/18/2010 and assigned Florida document number L10000119981.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

AREA GROUP SERVICES, 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: 1830 Mediterranean Road West
(Principal office address MUST BE A STREET ADDRESS) West Palm Beach, FL 33406

Enter new mailing address, if applicable: c/o Cleary Builders, LLC
(Mailing address MAY BE A POST OFFICE BOX) 117 S. Cook Street #221
Barrington, IL 60010

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TALLAHASSEE, FLORIDA

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AND
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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

_____, **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 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 = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	KEVIN CLEARY	117 S. COOK STREET #221 BARRINGTON, IL 60010	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	CLEARY BUILDERS, LLC	117 S. COOK STREET #221 BARRINGTON, IL 60010	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	THE AREA GROUP, LLC	1830 MEDITERRANEAN ROAD WEST WEST PALM BEACH, FL 33406	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

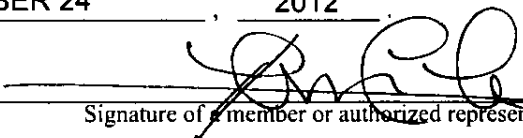
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

APPROVED
AND
FILED

12 OCT 29 PM 12:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated OCTOBER 24, 2012



Signature of a member or authorized representative of a member

KEVIN CLEARY

Typed or printed name of signee