L11000002902

(Requ	uestor's Name)	
(Addr	ess)	
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(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Busi	ness Entity Nar	ne)
(Doci	ıment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	
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11 MAR 21 PH 12: 59
SECRETARY OF STATE
AND ANASSEF, FLORIDA

J. BRYAN

MAR 2 2 2011

EXAMINER

COVER LETTER

Division of Cor				
SUBJECT:	Estimation Creation LLC			
	Name of Li	mited Liability Company		-
The enclosed Articles of	Amendment and fee(s) are	submitted for filing.		
Please return all correspo	ndence concerning this mat	ter to the following:		
		Donald E Gralin Name of Person		
		Name of Leison		,~~
	ł	Estimation Creation-LL0	С	20 3 Mary
		Firm/Company		一强制
				DSAR TI
		15625 Orange Blvd		一篇是一
		Address		F ST IS!
		Loxahatchee, FI 33470)	MAR 21 PHIZ: 59 SECRETARSEE, FLORID SECRETARSEE, FLORID
		City/State and Zip Code		— 4
	ba	ackdraft125@yahoo.co	m	
	E-mail address	; (to be used for future annual rep	ort notification)	•
For further information co	oncerning this matter, please	e call:		
Dor	nald E Gralin	at (561)	798-4690	
Name of	Person		Daytime Telephone Numb	oer .
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 ea	Certific nclosed) Certific	Filing Fee, cate of Status & code Copy control copy control copy control 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

ESTIMATION C	REATION LLC	
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company Florida document numberL11000002902	were filed onJanuary 5, 201	1 and assigned
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab	ility company here:	"LLC" on the althreviation
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Company," the designation	"LLC" on the abbreviation
Enter new principal offices address, if applicable:	15625 Orange Blvd	OR SO
(Principal office address MUST BE A STREET ADDRESS)	Loxahatchee, Fl 33470	
Enter new mailing address, if applicable:	15625 Orange Blvd	
(Mailing address MAY BE A POST OFFICE BOX)	Loxahatchee, Fl 33470	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent: New Registered Office 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 Address **Type of Action Title** Name MGR Donald E Gralin 15625 Orange Blvd √ Add Loxahatchee, FL33470 Remove 8877 Kettle Drum Terrace ☐ Add Remove Boynton Beach, Fl 33473 ☐ Add Remove _ Add Remove □Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Donald E Gralin Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00