

L 14 0000 29975

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

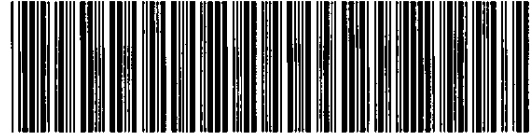
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Handwritten initials/signature*

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: GATOR PAVING & CONSTRUCTION, 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:

CARMELO GIGLIO  
Name of Person

GATOR PAVING & CONSTRUCTION, LLC  
Firm/Company

1329 S. N ST.  
Address

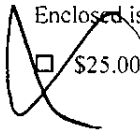
LAKE WORTH, FL 33460  
City/State and Zip Code

carmelo579@aol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CARMELO GIGLIO at 561 856 1930  
Name of Person 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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 28, 2014

Carmelo Giglio  
1329 S. "N" St.  
Lake Worth, FL 33460

SUBJECT: GATOR PAVING & CONSTRUCTION, LLC  
Ref. Number: L14000029975

We have received your document for GATOR PAVING & CONSTRUCTION, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Elliott R McCaskill  
Registration Specialist II

Letter Number: 414A00016140

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14 AUG -4 AM 8:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

GATOR PAVING & CONSTRUCTION, 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 FEB, 21, 2014 and assigned Florida document number L14000029975

This amendment is submitted to amend the following:

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

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)*

2500 QUANTUM LAKES DRIVE  
SUITE 203  
BOYNTON BEACH, FL 33420

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  
\_\_\_\_\_, 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 605, 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

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SECRETARY OF STATE  
ALAHASSEE, FLORIDA

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager  
AMBR = Authorized Member

MGR

Title	Name	Address	Type of Action
MGR	CARMELD GIGLIO	1329 S. "N" ST. LAKE WORTH, FL 33409	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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SECRETARY OF STATE  
ALLIANCE  
14 AUG -4 AM 8:16  
FLORIDA

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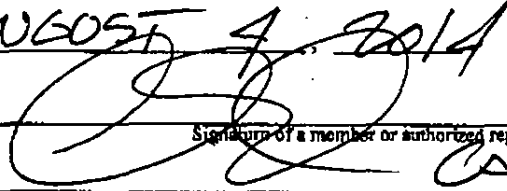
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

*(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)*

Dated AUGUST 4, 2014

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member  
CARMELO GIGLIO  
\_\_\_\_\_  
Typed or printed name of signer

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA