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SEP 1 6 2013 D. BUTLER

COVER LETTER

TO:	Registration Section
	Division of Corporations

Southeast Bonded Homebuilder Warranty Association, 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:

Joe Doyle

Name of Person

Bankers Financial Corporation

Firm/Company

11101 Roosevelt Blvd NE

Address

Saint Petersburg, FL 33716

City/State and Zip Code

legal@bankersinsurance.com

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

For further information concerning this matter, please call:

Joe Dovle

727 823-4000 ext 4417

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

Name of Person

□ \$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Southeast Bonded Homebuilde		5 0
(<u>Name of the Limited Liab</u> (A Flori	ility Company as it now appears on our records.) Ida Limited Liability Company)	3 (F.E.
The Articles of Organization for this Limited Liability Florida document number L00000010532 This amendment is submitted to amend the following	ty Company were filed on 08/31/2000	SEP 12 PH 3: 13
A. If amending name, enter the new name of the	limited liability company here:	₹
Bonded Builders Inspection Services, LLC		
The new name must be distinguishable and end with the "L.L.C."		"LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	ODRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2	
B. If amending the registered agent and/or re registered agent and/or the new registered office a		r the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	ddress
	, 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member					
<u>Title</u>	<u>Name</u>	Address	Type of Action		
-			Add		
			Remove		
_			Add		
			Remove		
			SECRE TALLAH 13 SEP		
			AS A		
			Add Figure 1		
			HOA IDA		
			Remove		
			Remove		
			Add		
			Remove		

D. If amending any other information	on, enter change(s) here: (Attach additional sheets, if neces	ssary.)
•		
Dated September 5	, <u>2013</u>	
MM		
Signat Richard G. Torra		
	Typed or printed name of signee	13 AL
	Page 3 of 3	SEP AH
	Filing Fee: \$25.00	ASSEE F
		FLORID M 3: 13

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