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09 OCT -7 PM 3:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 29 2009

J. BRYAN

OCT - 8 2009

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DAVIS & SONS DRYWALL AND FRAMING, 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:

DARLEEN DAVIS

Name of Person

DAVIS & SONS DRYWALL AND FRAMING, LLC

Firm/Company

P.O. BOX 750

Address

HAINES CITY, FL 33845

City/State and Zip Code

DAVISENTRPRISESLLC@VERIZON.NET

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

For further information concerning this matter, please call:

DARLEEN DAVIS

Name of Person

at (863)

419-5336

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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09 OCT -7 PM 3:58
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TALLAHASSEE, FLORIDA

Davis & Sons Drywall and Framing, LLC

Memo

To: Registration Section **Attn:** Div. of Corporations
From: Darleen Davis
CC:
Date: 10/5/2009
Re: Amendment – Davis & Sons Drywall and Framing, LLC

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I have received your notification in reference to the above amendment filing. Per your notification the change was not filed due to the name duplicated in your system. Please note the updated amendment form with the new designated name change.

I also noticed that the \$30.00 fee was not returned – nor any reference to it. I am assuming that the monies are being held upon completion of this filing – so therefore it has not been included again with the updated document. Please contact my office if additional information is required.

Thanks,
Darleen Davis
President/CEO
P.O.Box 750
Haines City, Fl. 33845
(863) 421-7352 / Fax: (863) 421-7361



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 29, 2009

DAFILEEN L. DAVIS
DAVIS & SONS DRYWALL AND FRAMING, LLC
PO BOX 750
HAINES CITY, FL 33845

SUBJECT: DAVIS & SONS DRYWALL AND FRAMING, LLC
Ref. Number: L01000019650

COPY

COPY

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09 OCT - 7 PM 3:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for DAVIS & SONS DRYWALL AND FRAMING, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is #L06000038150, DAVIS & SONS LLC.

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) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 509A00031615

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

DAVIS & SONS DRYWALL AND FRAMING, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on NOVEMBER 2001 and assigned
Florida document number L01000019650.

This amendment is submitted to amend the following:

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

DAVIS & SONS CONSTRUCTION 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:

(Principal office address MUST BE A STREET ADDRESS)

100 EMERALD ISLE ROAD

SUITE A

HAINES CITY, FL. 33844-6702

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. BOX 750

HAINES CITY, FL. 33845

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

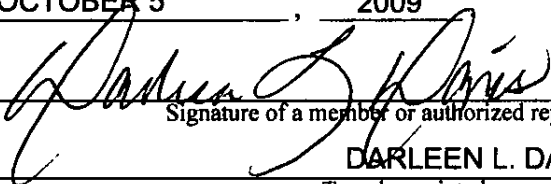
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input 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
			<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.)*

Dated OCTOBER 5, 2009



Signature of a member or authorized representative of a member

DARLEEN L. DAVIS

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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