2005 HAY 18 P 1: 38	} 					
SECRETARY OF STATE SECRETARY OF STATE TALLAHASSEE, FLORID (Requestor's Name)	A					
(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(,						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



800053675478

05/18/05--01017--003 **60.00

TRANSMITTAL LETTER

FILED

TO: Registration Section Division of Corporations

2005 MAY 18 P 1:38

SUBJECT: Solid Wood loves, 26 SECRETARY OF STATE
(Name of Limited Liability Company) TALLAHASSEE, FLORIDA

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

Please return all correspondence concerning this matter to the following:

(Name of Person)

CARO CONSTRUCTION, 22C

(Firm/Company)

801 Robert AVE

(Address)

LEHIGH ACRES F/ 33972

(City/State and Zip Code)

For further information concerning this matter, please call:

MI6VEL A. CARO at (239) \$50 7890

(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

S25.00 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)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2005 HAY 18 P 1:38

SECRETARY OF STATE TALLAHASSEE, FLORIDA

<i></i>	,			TALLAHASSEE, FLURID
 Solid	Wood	DOORS.	110	
(A F	(Present lorida Limited I	Name) Liability Company)	

SECOND: The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:

COUPANY MAME CHANGE TO: CARO CONSTRUCTION, LLC
PRINCIPAL LINE OFF ACTIVITIES! CONSTRUCTION,

IMPORT, EXPORTS & SERVICES

Signature of a member or authorized representative of a member

MIGUEL A: CARD

Typed or printed name of signee

Filing Fee: \$25.00