٠. (FAX)9043 10/04/2011 08:43 Driver, Mcafee, Peek & Hawthorne **S**rporations ision d **Electronic Filing Cover Sheet** Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document. (((H11000240486 3)))



H110002494883ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations Fax Number : (850)617-6383

From:

Account Name : DRIVER, MCAFEE, PEEK & HAWTHORNE, P.L. Account Number : 120020000137 Phone : (904)301-1269 Fax Number : (904)301-1279

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

AH 11:27	STATE FLORIDA	LLC	AMND/RESTATE/CORRECT OR M/MG RESIGN			
AK			Certificate of Status	0	PË STATE FLORID	
+	SSI		Certified Copy	0		p 💭
÷	HA HA		Page Count	03	. DA O	ת ת
001	SECRET		Estimated Charge	\$25.00		•
-	TAI	•				J. SAULSBERR EXAMINER
		,	· · · · · · · · · · · · · · · · · · ·			OCT 5 2011

https://efile.sunbiz.org/scripts/efilcovr.exe

10/04/2011	08:43 Driver,	Mcafee.	Peek &	Hawthorne

(FAX)9043011279

	H11000240488 3	C	OVER LETTER			
TO:	Registration Sec Division of Corj					
STIR	JECT:	BCR Envi	ronmental, LLC			
5010			ed Liability Company	1/1		
The c	melosed Articles of A	Amendment and fee(s) are subs	nitted for filing.			
Pleas	e return all correspo	ndence concerning this matter	to the following:			
		U	Name of Person			
			Name of Person			
		Driver, Mc	Afee, Peek & Hawthome, P.L	.		
		<u></u>	Firm/Company			
		One Ind	ependent Drive, Suite 1200			
			Address		As a	2
		Ja	icksonville, FL 32202		SECRETARY ALLAHASSE	<u> </u>
			City/State and Zip Code		HAN	5 1
		cbe	ll@northfloridalaw.com		SS -	an and a second se
-	6 - N N	·	-		m C	-
For	turber miormation o	concerning this matter, please o	au;		هه رب الم	0
<u></u>	and the second se	ine Jalovec Bell		07-0182	RID	1
	Name (of Person	Area Code & Daytime 1	felephone Numbe	n > O	1
Enc	losed is a check for t	he following amount:				
	25.00 Filing Pee	Certificate of Status	Certified Copy (additional copy is enclosed)	Certific	lling Fee, ate of Status & al Copy anal copy is en	
	Regist Divisi P.O. E	LING ADDRESS; mation Section on of Corporations 30x 6327 massee, FL 32314	STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle		

P.002/004

ì

i

H11000240488 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BCR Environmental, LLC
(Name of the Limited Liability Company of it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on ______ 04/11/2003 _____ and assigned Florida document number ______ L03000013079

This amendment is submitted to amend the following:

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

BCR Ho	ldings,	LLC
--------	---------	-----

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new p	rincipai	offices	address,	if a	pplicable:
-------------	----------	---------	----------	------	------------

(Principal office address MUST BE A STRE)	ET ADDRESS)			
		Ac		
-	·····	LAH		
Enter new mailing address, if applicable:	· · · · · · · · · · · · · · · · · · ·		{ ••••••	
(Mulling address MAY BE A POST OFFICE	<u>(BOX)</u>	Six Six	2 -	
		μĊ	, 7 2	m
B. If amending the registered agent and	/or registered office address on our re			5
registered agent and/or the new registered o	Mice address here:			<u>11 E.M.</u>
Name of New Registered Agent:	Donald J. Meson		· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	11235 St. Johns Industrial Parkv	vay North, Suite 2		

THE REPORT OF THE PROPERTY.					
	Enter Florida street address				
	Jacksonville	Florida	32246		
	Ćlav		Zip Code	_	

New Registered Agent's Signature, if changing Registered Agenti

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 affice address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Chungloy Registered August, Signature of New Resistered Agent

Page 1 of 2

H11000240485 3 _____

10/04/2011 08:44 Driver, Mcafee, Peek & Hawthorne

(FAX)9043011279

P.004/004

H11000240488 3

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

MGR = Manager MGRM = Managing Member

Title	Name	Address	Type of Action
MGR	Donald J. Mason, Chairmag	11235 St. Johns Indusirial Pkwy North Suite 2 Jacksonville, FL. 32246	
MGR	Scolt King	11235 St. Johns Industrial Pixer North Sulla 2 Jacksonville, Fl. 32246	Z Add Remove
MGR	Nicholas Stonestreet	<u>11235 St. Johns Indusitial Pkwy North</u> Suite 2 Jacksonville, EL 32246	Add Remove
			Adu Remova
			Remove
1 944	eanna		Add Remove

D. If amending any other information, enter change(s) here: (Attach additional shaces, (f necessary.)

	Add:	As	28	
	Donald J. Mason, Chief Executive Officer		2011 00	
	Nicholas Stonestreet, Chief Financial Officer	ATAF	4	
		RY 0		FTT.
	Aaron Zahn, Chief Executive Officer and Fredrick Zahn, Chief Financial Officer		AM 8:	
Dated _		TATE ORIDA	ະ ເກິດ ເມີດ ເມີດ ເມີດ ເມີດ ເມີດ ເມີດ ເມີດ ເມີ	
			-	
	Signature dia member or antipolosed representativa of a member			
	Aaron F. Zahn, Chief Executive Officer			
	Typed or printed name of signed			
	Page 2 of 2			

Filing Fee: \$25.00