L04000000324

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SECRETARY OF STATE DIVISION OF COSSORATION

C. LEWIS
FEB 2 6 2013
EXAMINER

COVER LETTER**

TO: Registration Section
Division of Corporations

NOAH BULL PLASTERING 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:

MARLA COPELAND ESTY

Name of Person

EASY TAX & ACCOUNTING LLC

Firm/Company

PO BOX 2066

Address

HIGH SPRINGS, FL 32655

City/State and Zip Code

EASYTAX@WINDSTREAM.NET

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

For further information concerning this matter, please call:

MARLA COPELAND ESTY

{.,/}386、454-8959

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED SECRETARY OF STATE DIVISION OF CORPORATION

2013 FEB 25 AM II: 46

NOAH BULL PLASTERING 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 12/23/2003 and assigned Florida document number <u>L</u>0400000324 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) 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

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager SECRETARY OF STATE

JIVISION OF CONFORATION or Managing Member being added or removed from our records: MGR = Manager 2013 FEB 25 AHII: 46 MGRM = Managing Member Type of Action Title **Address** Name REEDER, MARK 178 SW COCHRAN COURT MGR FORT WHITE, FL 32038

D. If amending any other information, enter change(s) here: (Attach additional sheets, if	necessary) FIL SECRETARY DIVISION OF C	EU 10f STATE ORFORATIONS
	2013 FEB 25	AM II: 46
Dated FEBRUARY 20 , 2013 .		
Signature of a member or authorized representative of a member		
Typed or printed name of signee		_

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Filing Fee: \$25.00