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PICK-UP	☐ WAIT	MAIL		
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COVER LETTER

TO:	Registration Se Division of Cor			_			
CUBUS	Palmer Ma	sonry LLC		-			
SUBJECT: • Name of Limited Liability Company							
		Amendment and fee(s) are sub					
		Gerald Palmer					
			Name of Person				
	Palmer Masonry LLC						
			Firm/Company				
		1206 Portland Street					
			Address				
		Pensacola Fl 32534					
			City/State and Zip Code				
		cassand871@cox.net E-mail address: (to be used for future annual	report notification)			
For furth	er information co	oncerning this matter, please ca		ŕ			
Gerald l	Palmer			25-0580			
	Name of	l Person	at () Area Code	Daytime Teleph	one Number		
Enclosed	l is a check for th	ne following amount:					
□ \$25.	00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee Certified Copy (additional copy is end		\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Address	<u>s:</u> 	Street A	ddress:			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Palmer Masonry LLC			
(<u>Name of the Limited Liability Con</u> (A Florida Limite	ipany as it now appears on our records ed Liability Company)	<u></u>)	
The Articles of Organization for this Limited Liability Compa Florida document number 1.04000000420	ny were filed on 01/05/2004	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company here:		
The new name must be distinguishable and contain the words "Limited Lie	ability Company," the designation "LLC"	or the abbreviation L.L.C."	
Enter new principal offices address, if applicable:		3 3 7	
(Principal office address MUST BE A STREET ADDRESS)		23	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		G 3: 29	
B. If amending the registered agent and/or registered offic	e address on our records, <u>enter t</u>	he 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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person—being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Ray Palmer	1206 Portland Street Pensacola Fl 32534	□ Add
		··· · · · · · · · · · · · · · · · · ·	■Remove
		 	□ Change
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			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) _ (optional) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. October 20 Derald Po Signature of a member or authorized representative of a member Gerald Palmer Typed or printed name of signee

Filing Fee: \$25.00