L04000023982

(Requestor's Name)		
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(City/State/Zip/Phone #)		
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COVER LETTER

Division o	f Corporations				
SUBJECT:	JOSEPH DENT PAINTING & DRYWALL REPAIR LLC				
(Name of Limited Liability Company)					
The enclosed Articl	es of Amendment and fee(s) are submitted for filing.				
Please return all cor	respondence concerning this matter to the following:				
	LINDSIE POSTERT				
, · · ·	(Name of Person)				
. :	IMPACT TAX & ACCOUNTING INC				
	(Firm/Company)				
	8730 THOMAS DR #1110A				
	(Address)				
	PANAMA CITY, FL 32408				
	(City/State and Zip Code)				
For further informat	ion concerning this matter, please call:				
LINDS	E POSTERT at (850) 235-6221				
	(Name of Person) (Area Code & Daytime Telephone Number)				
Enclosed is a check for	r the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & S55.00 Filing Fee & Settificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)				

MAILING ADDRESS:

Registration Section

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

JOSEPH DENT PAINTING & DRYWALL REPAIR LLC

(Present Name) (A Florida Limited Liability Company)

FIRST:	The Articles of Organization were filed on document number L04000023982 and	l assigned	
SECOND.			
SECOND:	This amendment is submitted to amend the following: REMOVE MEMBER:		
	MICHAEL SPENCER		_
	1908 SHERMAN AVE		
	PANAMA CITY, FL 32405	<u> </u>	_ >
	TAIAMA OITT, TE 32400	SE CRE	<u> </u>
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		H L	
		I: 56 SAIE LORID	- 5
		Dr. o.	
			-
			-
Dated JU	NE 21, 2006		
	Signature of a member or authorized representative of a member	····-	
	JOSEPH DENT, MANAGING MEMBER		
	Typed or printed name of signee		

Filing Fee: \$25.00