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M. THOMAS

JUN 2 3 2009

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporate			
SUBJE	CT:	Woellen U Name of Limit	Construction LLC ted Liability Company	
The end	closed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please 1	eturn all correspond	dence concerning this matter	to the following:	
		RichA	Rd H. Woellen Name of Person	
		. Woeller	Name of Person Construction LLC Firm/Company	
		4751	NE 138 Terr. Address	2009 JUH 22 AM II: 45 SECRETARY OF STATE TAILLAHASSEE, FLORIDA
		Willis	S/6 n FL 32696 City/State and Zip Code	122 AT
		E-mail address: (t	ex Const LLC & Aol. Co o be used for future annual report notificat	om Frontier 5
For fur	her information cor	ncerning this matter, please co	all:	
	Richard Name of I	H. Woeller Person	at (352) 494 - 93. Area Code & Daytime T	23 Gelephone Number
Enclose	ed 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**

(Name of the Limited Lia) (A Flor	Construction LLC bility Company as it now appear rida Limited Liability Company)	s on our records.)
The Articles of Organization for this Limited Liabili		3 MARCH 2004 and assigned
Florida document number <u>LO4 0000 247</u>	<u>62</u> .	
This amendment is submitted to amend the followin	ng:	
A. If amending name, enter the new name of the	limited liability company her	<u>e</u> :
The new name must be distinguishable and end with the	e words "Limited Liability Compa	ny," the designation "LLC" or the abbreviation
"L.L.C."		TALL OF THE
Enter new principal offices address, if applicable		2
(Principal office address MUST BE A STREET A	DDRESS)	S 2 17
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	Tr.
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter the name of the new
Name of New Registered Agent:	Ken Sheffie	14
New Registered Office Address:		
	Enter Florida street address	
-	City	, Florida Zip Code
New Registered Agent's Signature, if changing Regis	•	inp couc

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.

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager

MGRM = Managing Member

<u>Title</u> Name <u>Address</u> Type of Action Ken Sheffield MGRIN Remove Remove ___ Add Remove _ Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary)) Dated 15 June Signature of a member or authorized representative of a member Richard H. Woeller
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00