L04000054383

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EXAMINER



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FILED
SECRUTARY OF STATE
DIVISION OF CORPORATIONS

COVER LETTER

Division of Corporations ·	1
SUBJECT: GERALD MOBIEY PLASTERING LLC	
Name of Limited Liability Company	
	9 V S
The enclosed Articles of Amendment and fee(s) are submitted for filing.	P. HE
Please return all correspondence concerning this matter to the following:	The state of the s
GERALD MOBIEY Name of Person	SECRETARY OF SOME IN 18
GERALD MOBIEY PLASTERING LLC	
17521 NW COUNTY ROAD 231 Address	
CATMESVIILE, FIORISA 32609 City/State and Zip Code 1/10BIEVKVQ YAHOO. COM E-mail address: (16 be used for future annual report notification)	
NIOBIEYKYQ YAHOO.COM	
For further information concerning this matter, please call:	
KYM MOBIEY at (352) 485-2888 Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certified Copy Certificate of Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}	Status &

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

MOBIEV'S PI	ASTERING	460	01/VI		
(Name of the Limited Liability (A Florida	Company as it now Limited Liability Com	pany)	7		
The Articles of Organization for this Limited Liability C		on July 22, 200	and assigned		
Florida document number <u>L04000543</u>	8,3		3 95		
This amendment is submitted to amend the following:			* · · · · · · · · · · · · · · · · · · ·		
A. If amending name, enter the new name of the lim	ited liability compa	ny here:			
The new name must be distinguishable and end with the wo	StERING	266			
The new name must be distinguishable and end with the wo "L.L.C."					
Enter new principal offices address, if applicable:	175	521 M.M. C NESVILE, FL	Z. K. 231		
(Principal office address MUST BE A STREET ADDI	RESS) GAI	NEBVILL, FL	ORTA A		
		3260	9		
Enter new mailing address, if applicable:	BAN	1E			
(Mailing address MAY BE A POST OFFICE BOX)					
•					
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		s on our records, enter	r the name of the new		
Name of New Registered Agent:	RALLS N/	OBIEY	•		
New Registered Office Address: 17	GERAIS MOBIEY 17521 NW C.R. 231 Enter Florida street address				
GAINESVILLE Florida FLORISA City Zip Code					
New Degistered Agent's Signature if changing Degistere			Lip 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 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member **Title Type of Action** <u>Name</u> **Address** MGE GERALS MOBIEY Add A Remove ☐ Add Remove ☐ Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated FEBRUARY Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00