L04000067154

(Re	equestor's Name)		
(Ad	dress)		
(Ad	dress)	<u> </u>	
(Cit	y/State/Zip/Phone	· #)	
PICK-UP	☐ WAIT	MAIL	
(Bu:	siness Entity Nam	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			

Office Use Only



900043592889

12/27/04--01057--008 **25.08

2004 DEC 27

PH 3: 59

M 01/05/05

3/

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: All Florida Interior Exterior Repair, 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:
Michael Oliver (Name of Person)
All Florida Fater or Exterior Repair, LLC
28 Pooks Bluff Rd.
Pance de Leon FC 32455 (City/State and Zip Code)
For further information concerning this matter, please call:
Michael Oliver at 850 835-1832 AFF F
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\text{\$\text{\$\sigma}\$\$ \$30.00 Filing Fee & \$\text{\$\sigma}\$\$ \$\$ \$60.00 Filing Fee & \$\$\cent{\$\cen{\$\cent{\$\cen{\$\cent{\$\cent{\$\cent{\$\cent{\$\cent{\$\cent{\$\cent{\$\cent{\$\cen{\$\cent{\$\cent{\$\cent{\$\cent{\$\cen{\$\cent{\$\cent{\$\cent{\$\cent{\$\cen{\$\cent{\$\cent{\$\cen{\$\cent{\$\cent{\$\cent{\$\cen{\$\cent{\$\cen{\$\cent{\$\cent{\$\cent{\$\cen{\$

(additional copy is enclosed)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 **MAILING ADDRESS:**

Certified Copy

(additional copy is enclosed)

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

xterior Repair, LLC

All Aorida In

	(Present Name) (A Florida Limited Liability Company)	
FIRST:	The Articles of Organization were filed on Sapt. 13, 2004 and assigned document number 2000 67154.	
SECOND:	The following amendment(s) to the Articles of Organization was/were adopted by liability company: Afficke V Afficke V Brandon K. Wood Bruce, FC 32459	
Dated	Dar. 23 , 2004.	FILED 2004 DEC 27 PN 3: 59 SECRETARY OF STATE TALLAHASSEE, FLORIDA
	Signature of a member or authorized representative of a member Michael Oliver Typed or printed name of signee	_

Filing Fee: \$25.00