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(((H110001841073)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LICENSES ETC INC Account Number : I20070000159

Phone : (239)
Fax Number : (677)

: (239)777-1028 : (877)275-3593

Enter the email address for this business entity to be used for futur annual report mailings. Enter only one email address please.

Email Address: Structured Sign Solutions Qyahoo. rom

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN STRUCTURAL SIGN SOLUTIONS, LLC

Certificate of Status	1
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10L 20 2011

COVER LETTER

(((H11000184107 3)))

ro:	Registration S Division of Co				
SUBJE	·CT•	Structural S	ign Solutions, LLC		
, , , , , , ,			ted Liability Company		
The end	closed Articles o	f Amendment and fcc(s) are sub	enitted for filing,		
Please i	eturn all corresp	ondence concerning this matter	to the following:		
			Chrissi Jackson		
Name of Person					
			Licenses Etc, Inc.		
Firm/Company 15275 Collier Blvd 201-300					
			Address		
			Naples, FL 34119		
			City/State and Zip Code		
		Structura E-mail address; (alsignsolutions@yahoo.com to be used for future annual report notifica	tion)	
For fun	her information	concerning this matter, please c	eall:		
		rissi Jackson	at (239) 77	77-1028	
	Name -	of Person	Area Code & Daytime T	elephone Number	
Enclose	ed is a check for	the following amount:			
S25.	.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fcc. Certificate of Status & Certified Copy (additional copy is enclosed)	
	Regist	JING ADDRESS:	STREET/COURIER Registration Section Division of Corporati		

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

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

July 20, 2011

Florida Department of State

Division of Corporations

PO Box 6327

Tallahassee, FL 32314

Via Fax: 850-245-6030

Attn: Neysa Culligan, Regulatory Specialist II

Re: D & B Electrical Contractors, Inc.

Document Number P11000060053

We have received your letter regarding the business name change for Structural Sign Solutions, LLC (LO4000083115). Please proceed in issuing the name change for this entity to D & B Electrical Contractors, LLC.

As one of the shareholders who just dissolved D & B Electrical Contractors, Inc., please accept this letter as my affidavit that we have no intention of revoking the dissolution and are releasing this name to Structural Sign Solutions, LLC for the name change.

Thank you for your consideration and assistance in our process.

Dan Be

LICENSES ETC 1/001 7/20/2011 8:33:09 AM PAGE

Fax Server

PAGE 02/06

July 20, 2011

FLORIDA DEPARTMENT OF STATE Division of Corporations

LICENSES ETC INC

SUBJECT: D & B ELECTRICAL CONTRACTORS, LLC

REF: W11000037953

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved The name of a voluntarily dissolved business entity is business entity. not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Regulatory Specialist II FAX Aud. #: H11000184107 Letter Number: 411A00017120

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H110001841073)))

FILED

JUL 20 PM 4:16

Zip Code

		SECRETA	277
Structural Sign S	Solutions 11.0	TALLAHAS	RY OF STATE SEE, FLORIDA
(Name of the Limited Liability Compan (A Florida Limited Li	v as it now appear	s on our records.)	SEE, ELORIDA
(A Florida Limited Li	ability Company)		
The Articles of Organization for this Limited Liability Company	were filed on	11/16/2004	and assigned
Florida document numberL0400083115			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here	:	
D & B Electrical Co	ntractors, LLC		
The new name must be distinguishable and end with the words "Limit" L.L.C."	ed Liability Compar	ny," the designation "L	.LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			

-			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered offi	ce address on or	ur records, enter ti	be name of the new
registered agent and/or the new registered office address here	:		
Name of New Registered Agent:			
New Registered Office Address:			
	Ente	er Florida street addi	ress
	,-		

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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records. enter the title, name; and oddress of or Managing Member being added or removed from our records:

MGR = M MGRM =	anager Managing Member		
<u>Title</u>	Name	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
Area of the Wilderstone			Add Remove
			Add Remove
			AddRemove
D. If amer	nding any other information, enter ch	range(s) here: (Attach additional sheets, if necessar	<i>ָּ</i> וּיָרָ
			FIL 11 JUL 2 SECRETAR TALLAHASS
	July 19	200	ED 20 PH 4: 16 RRY OF STATE SEE, FLORIDA
Dated	Signature of a the	mber or authorized representative of a member	
	T.	David Blom yped or printed name of signee	-

Page 2 of 2

Filing Fee: \$25.00