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(City/State/Zip/Phone #)				
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S. HAWKES

SEP 2 7 2010

EXAMINER

COVER LETTER

TO: Registration : Division of C			a.	
SUBJECT:	Scherer (Construction, LLC		
		tited Liability Company		
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.		
Please return all corres	pondence concerning this matte	r to the following:		
Andrew Daigneau				
		Name of Person		
Scherer Construction, LLC				
		Firm/Company		
2155 14th Circle North				
		Address		
	St.	Petersburg, Fl. 33713		
City/State and Zip Code				
andydaigneau@goldensouthconstruction.com E-mail address: (to be used for future annual report notification)				
For further information	concerning this matter, please of	call:		
	drew Daigneau		21-7515	
Name	of Person	Area Code & Daytime T	elephone Number	
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 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

SC (Name of the Limited)	nerer Construction, LLC Liability Company as it now appear	s on our records.)	
(A	Liability Company as it now appear Florida Limited Liability Company)	,	
The Articles of Organization for this Limited Lia	ability Company were filed on	11/29/2004	and assigned
Florida document number L0400088	049 .	٠	
		The state of the s	3 -
This amendment is submitted to amend the follo	wing:		ALEB 24 PI
		č./ . 	2 0 D
A. If amending name, enter the new name of	the limited liability company her	<u>e</u> :	ELS IS
The second of the state of the	A	22 (1 1 1 44 44 44	3
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Compa	ny," the designation "L	or the abbreviatio
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREET			
Trincipal Office address MOST BE A STREET	ADDRESS)		
Enter non-motion address if and inchin			
Enter new mailing address, if applicable:		· · · · · · · · · · · · · · · · · · ·	
(Mailing address MAY BE A POST OFFICE B	<u> </u>		
			
D 16 amounding the modern of and and			
B. If amending the registered agent and/or registered agent and/or the new registered offi		ur records, <u>enter ti</u>	ne name of the nev
Name of New Registered Agent:			
-			
New Registered Office Address:	E	Eli-l	
	Enter Florida street address		
		, Florida	
	Citv		Zip 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, enter the title, name, and address of each Manager of Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member <u>Title</u> **Type of Action** <u>Name</u> **Address** MGRM Marotte, Daniel 2155 14th Circle North ☐ Add √ Remove St. Petersburg, Fl 33713 Remove □Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) ADRIL 30 2010 Dated __ Signature of a member or authorized representative of a member Andrew Daigneau Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00