

L04000093413

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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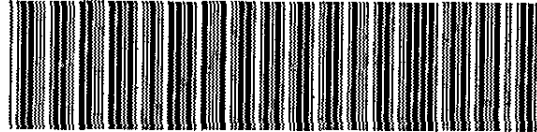
(Business Entity Name)

(Document Number)

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Acme Drywall Spray Co. 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:

DANIEL J. BRYAN  
(Name of Person)

Acme Drywall Spray Co. LLC  
(Firm/Company)

139 Washington Ave.  
(Address)

INDIANLANTIC, FL 32903  
(City/State and Zip Code)

For further information concerning this matter, please call:

DANIEL BRYAN at (321) 223 4877  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed 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

FILED  
07 JUL -5 AM 11:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Acme Drywall Spray Company LLC

(Present Name)  
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 12/27/04 and assigned  
document number L 04000093413

SECOND: This amendment is submitted to amend the following:

I would like to add the following  
persons as officers in Acme Drywall  
Spray Co. LLC

Jose Torres - managing member  
Moriya McNulty - managing member

Both of these officers elect to be  
exempt from workers comp. insurance.

Dated 7/2/07, 07

Daniel J. Bryan

Signature of a member or authorized representative of a member

DANIEL J. BRYAN

Typed or printed name of signee