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2000 NOV -6 A II: 50 SECRETARY OF STATE

T. HAMPTON

NOV - 7 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: E. V. C. Services 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:					
William E. CARN, Ja. (Name of Person)					
F.V. G. Services, LLC (Firm/Company)					
P.D. Box 391267 (Address)					
Seltown Fl. 32739 (City/State and Zip Code)					
For further information concerning this matter, please call:					
(Name of Person) Area Code & Daytime Telephone Number)					
Enclosed is a check for the following amount:					
\$25.00 Filing Fee Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) 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

2000 NOV -6 A III
SECRETARY OF STA

E.U.G SERVICES, LLC

(Name of the Limited Liability Company as it now appears on our records
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on April 27, 2008 and assigned Florida document number 1050000 2931.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with "L.L.C."	h the words "Limited	i Liability Company," the	e designation "LLC" or the abbreviation
Enter new principal offices address, if applica	able:	3027 N. C	aving towoda.
(Principal office address MUST BE A STREE	T ADDRESS)	De Honx	201 ng tow Da. Fl. 32738
Enter new mailing address, if applicable:		P.O. 60x	391267
(Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>	Deltona	F1: 32739
B. If amending the registered agent and/or registered agent and/or the new registered of	_	e address on our rec	cords, enter the name of the new
Name of New Registered Agent:	w:11:Cu_	m E.C.	en, Ja
New Registered Office Address:	.	(Enter Flo	orida 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 or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

Title <u>Name</u> **Address** Type of Action MORM William E CARN, I. 3027 N. Covington De Home Fr. 32738 Remove Remove □ Add Remove ☐ Add Remove r Add ☐ Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00