

LO5000017462

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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10/28/13--01004--008 **30.00

2013 OCT 29 AM 10:26

J. SAULSBERRY
EXAMINER

OCT 31 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **AERIAL PRECAST CONCRETE**

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:

MARTIN PROULX

Name of Person

AERIAL PRECAST CONCRETE, LLC

Firm/Company

3100 Burris Road

Address

Davie, FL 33314

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Martin Proulx

Name of Person

954 321-0200

at ()

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

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

AERIAL PRECAST CONCRETE, 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 02/21/05 and assigned
Florida document number L05000017462.

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 the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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 office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: MARTIN PROULX

New Registered Office Address: 3100 BURRIS ROAD

Enter Florida street address

DAVIE, Florida 33314

City

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:

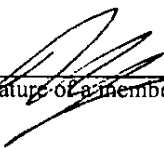
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	CLEMENT PROULX	2000 N. OCEAN DRIVE #5	<input type="checkbox"/> Add
		HOLLYWOOD, FL 33019	<input checked="" type="checkbox"/> Remove
MGRM	MARTIN PROULX	3100 BURRIS ROAD	<input checked="" type="checkbox"/> Add
		DAVIE, FL 33314	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> 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

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 OCT 29 AM 10:26
FILED

FREDERICK R. MACLEAN
ANNE B. MACLEAN
CHRISTOPHER J. EMA
W. THORNTON SCOTT**
LAURA G. MACLEAN
BRIAN V. BERGMAN

* ALSO ADMITTED IN KENTUCKY
** ALSO ADMITTED IN SOUTH CAROLINA

MACLEAN & EMA P.A.
Attorneys and Counselors at Law

OF COUNSEL
J. ALAN COX
TALLAHASSEE, FL

OF COUNSEL
ROBERT M. ARLEN
BOARD CERTIFIED
TAX ATTORNEY
DELRAY BEACH, FL

October 25, 2013

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Proulx/Aerial Precast Concrete, LLC
Our File No.: 6320.171912

To Whom It May Concern:

Enclosed please find the following items:

1. **Original** Resignation of Member, Managing Member or Manager from Florida or Foreign LLC to be filed;
2. Our check #609 in the amount of \$25.00 which is payable to Florida Department of State and represents a filing fee;
3. **Original** Articles of Amendment to Articles of Organization to be filed; and
4. Our check #610 in the amount of \$30.00 which is payable to Florida Department of State and represents a filing fee and Certificate of Status.

Should you have any questions regarding the enclosed, please do not hesitate to contact our office.

Very truly yours,
MacLean and Ema


Caitlin Ema Carbone
Legal Assistant

Enclosures: as noted

2013 OCT 29 AM 10:26
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FL 32314