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T. HAMPTON

MAR 8 0 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: PJ Construction Group 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:
Paule A Jacques Name of Person
P5 Construction Group LCC Firm/Company
2635 Gar field 5 TReet
HOLLYWOOD FL 33020 City/State and Zip Code
Hollywood FL 33020 City/State and Zip Code PJ Con STRuction & Bellsouth net De-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Paule A JACques at (954) 709-3304 Name of Person at (954) 709-3304 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) \$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

V) (On5Thustion	1 Grap U	our moords)		
(Name of the Limited Liability (A Florida Li	mited Liability Company)	our records.		
The Articles of Organization for this Limited Liability Co	mpany were filed on HAG	<u>eh 3 2005</u> and ass	igned	
Florida document number <u>L 0500002150</u>	28			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ed liability company here:			
· 	·	•		
The new name must be distinguishable and end with the word "L.L.C."	s "Limited Liability Company,"	the designation "LLC" or the a	bbreviation	
Enter new principal offices address, if applicable:			<u> </u>	
(Principal office address MUST BE A STREET ADDRE	ESS)		2	
		<u> </u>	138	
		MAR.	発配	
Enter new mailing address, if applicable:		29	132	
(Mailing address MAY BE A POST OFFICE BOX)	,	70	행으운	
		3	OR S	
	<u>- </u>	<u></u>	, <u>22</u>	
B. If amending the registered agent and/or registered agent and/or the new registered office addresses		records, enter the name o	f the new	
registered agent and/or the new registered office addre	<u>ss nere</u> :		1.70	
. Name of New Registered Agent:				
New Registered Office Address:		•		
New Registered Office Address.	Enter Florida street address			
		, Florida		
	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 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 **Type of Action Title** Name 1 **Address** REASURER ADTIAN MOTORGEL ∏_Add Remove ☐ Add Remove ☐ Add ☐ Remove Add Remove \square Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated March 25 2010 a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00