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PICK-UP	WAIT	MAIL
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(5.	John Son Emery Trust	,,,,
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Eiling Officer	
Special Instructions to Filing Officer:		
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Office Use Only



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SECRETARY OF STATE

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COVER LETTER

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1 2 2		COVER LETTER	
TO: Registration Division of	Section Corporations	•	
SUBJECT: J.	hnson Home (Name of Limi	Builders, LL ited Liability Company)	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	Todd E.	Johnson (Name of Person)	
		(Firm/Company)	·
	15737 Boy 1	(Address)	
	Clerment,	(Address) FL 3 4711 (City/State and Zip Code)	
For further information	n concerning this matter, please co	all:	
Told E. (Na	To hhsom	at (<u>32)</u>) 299 - (Area Code & Day	TAIS time Telephone Number)
Enclosed is a check for	or the following amount:		
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy	\$60.00 Filing Fee, Certificate of Status &

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Certified Copy (additional copy is enclosed)



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 6, 2009

TODD E. JOHNSON 15737 BAY LAKES TRAIL CLERMONT, FL 34711

SUBJECT: JOHNSON CONSTRUCTION LLC

Ref. Number: L05000030445

We have received your document for JOHNSON CONSTRUCTION LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

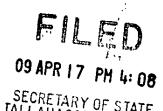
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Regulatory Specialist II

Letter Number: 209A00011475

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Johnson Home	Suilders, 260	ALLAHASSEE FLORIDA
Johnson Home (Name of the Limited Liability (A Florida	y Company as it now appears on Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability O	Company were filed on Mare	4 28/2005 and assigned
Florida document number 105000030445	'	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
***************************************	· · · · · · · · · · · · · · · · · · ·	Conclusion Commell
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD)	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		

B. If amending the registered agent and/or regis		records, enter the name of the new
registered agent and/or the new registered office add	<u>lress here</u> :	
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter l	Florida street address)
		, Florida
magnitude control of the control of	(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:

R = Ma RM = N	nager Nanaging Member	•	
<u>e</u>	Name	<u>Address</u>	Type of Action
			Add Remove
			Add Remove
			Add Remove
·········			Add Remove
			Add Remove
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ameno	ding any other information, enter char	nge(s) here: (Attach additional sheets, if neces	sary.)
			09 APR 1 SECRETA TALLIAHAS
	3/31 . 20	po <u>9</u> .	17 PH 4: 08 ARY OF STATE SSEE FLORIDA
	Signature of a member Told E. Johnson Type	per or authorized representative of a member	b

Page 2 of 2

Filing Fee: \$25.00