105000074015

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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EXAMINER



Dear sirs;

I have been in contact with the DBPR and they finally changed my business name for their records. They instructed me to file an amendment to change my business name once again from CONTRACTORS GROUP, LLC to PAVERS & POOL DECKS, LLC. I have included copies of the name change from their website.

Please update your records so that I may continue on in business in this stressful economy.

Thank you in advance for your attention to this matter.

Sincerely,

Lawrence Zurn

CGC1510837

Office phone # 239-218-9556

ALLAHASSEE FLORIOA

COVER LETTER

TO:	Registration S Division of Co				
SUBJE	CCT:	CONTRACT	ORS GROUP, LL	C	
			ted Liability Company		
The end	closed Articles of	f Amendment and fee(s) are sul	omitted for filing.		
Please 1	return all corresp	ondence concerning this matter	to the following:		
		L	AWRENCE W. ZURN		
			Name of Person		
		CONT	RACTORS GROUP,	LLC	
			Firm/Company		
		83	18 BUTTERNUT ROA	ND	
			Address		
		FO	RT MYERS, FL 3396	67	1912 1912
		•	City/State and Zip Code		ZOIŻ MAR SEGRETA
		LARi E-mail address: (RYZ1955@GMAIL.CO to be used for future annual rep	OM ort notification)	R-6
For furt	ther information	concerning this matter, please of	all:		
		7.			
		RENCE W. ZURN of Person	at (239)	218-9556 Daytime Telephone Num	<u>5</u> 7 2
	(Name)	or Person	Area Code &	Daytime Telephone Num	ber
Enclose	ed is a check for t	the following amount:			
\$25.	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55,00 Filing Fee & Certified Copy (additional copy is e	Certifi nclosed) Certifi	Filing Fee, cate of Status & ied Copy onal copy is enclosed)
	Regist Divisi	LING ADDRESS: tration Section on of Corporations Box 6327	Registration	Corporations	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CONTRACTORS	S GROUP, L	LC			
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appea Liability Company)	rs on our records.)			
The Articles of Organization for this Limited Liability Company Florida document numberL0500074015	were filed on	JULY 28, 2005	and	d assign	ed
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	ility company he	<u>re</u> :			
PAVERS & POOI	L DECKS, LLC				
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Compa	any," the designation '	'LLC" or	the abbr	eviation
Enter new principal offices address, if applicable:	8318 BUTTE	RNUT ROAD			
(Principal office address MUST BE A STREET ADDRESS)	FORT MYER	RS, FL 33967			
			<u> </u>	=======================================	
Enter new mailing address, if applicable:				7	" Ē';
(Mailing address MAY BE A POST OFFICE BOX)			公式	l I	A SE WE WELL
(making latitess MAT BLAT OST OTTICE BOA)					
		·	: : : : : : : : : : : : : : : : : : :	-15	*****
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, <u>enter</u>	the nan	ne of t	he new
\					
Name of New Registered Agent:					
New Registered Office Address:					
	En	ter Florida street ad	dress		
		, 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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

<u> </u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
	<u> </u>		Add Remove
			Add Remove
			Add Remove
			☐ Add ☐ Remove
	· · · · · · · · · · · · · · · · · · ·		Add
. If amend	ling any other information,	enter change(s) here: (Attach additional she	eets, if necessary.)
			SET OF SH
			Dr. U
ated	MARCH 3		
	aure	ue W. Law	
		of a member or authorized representative of a m	ombor

Page 2 of 2

Filing Fee: \$25.00