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SECRETARY OF STATE
ALLAHASSEE, FIORIDA

J. BRYAN
JAN 1 4 2009
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Greg Steele Drywall and Handyman Services Limited Liability

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Name of Limited Liability Company

Please return all correspo	ondence concerning this matter	to the following:			
		Greg Steele			
		Name of Person			
	Greg Steele Drywall	and Handyman Services	Limited Liabilit		
		Firm/Company			
	P. O. Box 6124			SEC FALL	ŝ
	Address			CRETAR)	<u> </u>
	Pe	nsacola, Florida 32503		111	
		City/State and Zip Code			
	E-mail address: (to be used for future annual report not	ification)	T STATE FLORID	- <u>`</u>
For further information c	concerning this matter, please of	·	,		Ö
	Greg Steele	at (_850_)	292-8832		
Name o	of Person	Area Code & Daytii	me Telephone Number		
Enclosed is a check for the	he following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	ed) Certified (of Status &	rsed)
			(additiona)	r soh's is eller	Jacu,

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

Greg Steele Drywall and Handyman Services Limited Liability Services (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 Lia	ability Company were filed on	Aug 15, 2005	and assigned	
Florida document numberL05000081	077		SEC J	
This amendment is submitted to amend the follo	· ·		JAN 13 PI CAHASSEE	
A. If amending name, enter the new name of	the limited liability company her	<u>re</u> :	FEST	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Compa	any," the designation	"LL on the abbreviation	
Enter new principal offices address, if applica	ble:			
(Principal office address MUST BE A STREET	TADDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE E	BOX)			
		 ,		
B. If amending the registered agent and/o registered agent and/or the new registered off		our records, <u>enter</u>	the name of the new	
Name of New Registered Agent:				
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 Mahaging Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member <u>Title</u> **Address Type of Action** Name MGR ' Harry R. Rainer II 1344 Redwood Lane ✓ Add Gulf Breeze, Florida 32563 Remove Add Remove _ Add Remove Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) January 11 2010 Dated Signature of a member of authorized representative of a member Greg Steele Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00