EXAMINER

Office Use Only

300125859953

04/28/08--01037--001 **30.00

SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Civil Consulting & Construction Services 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:
Pamela J. Cox Esquire (Name of Person)
Pamela J. Cox Esquire (Name of Person) Cox & Rouse P. A. (Firm/Company)
240 Lookout Place (Address)
Maitland, Florida 32751 (City/State and Zip Code)
For further information concerning this matter, please call:
Pamela J. Cox at (H07) 644-5225 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \times \text{\$30.00 Filing Fee & Certificate of Status} \text{ \$\ \text{Certified Copy (additional copy is enclosed)} \$\ \text{Certified Copy (additional copy

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

(Name of the Limited LATE)	Hability Company as it now appears on Florida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Lia	bility Company were filed on Marc	ch 2 2006 and assigned
Florida document number <u>L06 0000 23</u>		,
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here:	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company," t	he designation "LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered office		ecords, <u>enter the name of the new</u>
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 Changing Registered Agent, Signature of New Registered Agent)

APR 28

Page 1 of 2

Page 1 of 2

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 **Title** <u>Name</u> Address **Type of Action** Robert P. Rudd MGRM Remove MGR 239 Maison Court ___ Add Altamonte Springs (401) 682 - 1515 Remove Add Remove ∏Add Remove Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) a member of authorized representative of a member Typed or printed name of signee Page 2 of 2

Filing Fee: \$25.00