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(City/	State/Zip/Phone	e #)		
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EXAMINER



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SEUSE LASSEF, FLORI

COVER LETTER

Division of Co		•	•			
SUBJECT:	GEOTEK CO	NSTRUCTION, LLC				
		ited Liability Company				
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.				
Please return all corresp	oondence concerning this matter	to the following:	72 10 10 10 10 10 10 10 10 10 10 10 10 10			
		JACK D HENRY				
		Name of Person				
	GEOT	EK CONSTRUCTION, LLC	10 R			
		Firm/Company	P			
	410	6 VISTA VERDE DR, #1				
	 	Address				
	NEW	PORT RICHEY, FL 34655				
		City/State and Zip Code	,,,,			
	J	DH@JLHENRY.COM to be used for future annual report notifical				
		·	non)			
For further information	concerning this matter, please of	all:				
JACK D HENRY		at (727) 26	67- 78 51			
Name of Person		Area Code & Daytime Telephone Number				
Enclosed is a check for	the following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
MAII	LING ADDRESS:	STREET/COURIE	R ADDRESS:			

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

GEOTEK CONSTRUCTION, LLC

,	T	•	e e e
ARTI	CLES OF O	RGANIZATION	
·	O	F ASO	
GEO ⁻	TEK CONST	TRUCTION, LLC	
(<u>Name of the Limited</u> (A	Florida Limited I	ny as it now appears on our records.) Liability Company)	
			0312
The Articles of Organization for this Limited L	iability Company	were filed on MARCH 14, 2006	and assigned
Florida document numberL0600002	7050		
This amendment is submitted to amend the follo	owina.		
This amendment is submitted to afficing the folia	ownig.		
A. If amending name, <u>enter the new name o</u>	f the limited liab	ility company here:	•
The new name must be distinguishable and end wi "L.L.C."	th the words "Lim	ited Liability Company," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:		4106 VISTA VERDE DR, #1	
(Principal office address MUST BE A STREET ADDRESS)		NEW PORT RICHEY, FL 34655	
Enter new mailing address, if applicable:		4106 VISTA VERDE DR, #1	
		NEW PORT RICHEY, FL 34655	
(Mailing address MAY BE A POST OFFICE	<u>BUA)</u>	NEVYT ON MONEY, I E 3400	<u> </u>
B. If amending the registered agent and/	or registered of	fice address on our records, enter t	he name of the new
registered agent and/or the new registered of	ffice address her	<u>e</u> :	
Name of New Registered Agent:	JACK D HE	NRY	
Navy Panistanad Office Address	4106 VISTA	VERDE DR, #1	
New Registered Office Address:		Enter Florida street addi	ress
	NEW POR	T RICHEY, FL 34655 , Florida	34655
		City Fibrida	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:

MGR = Manager

MGRM = Managing Member

Title **Type of Action** Name | Address **MGRM** RICHARD ANDERSON 2847 BELCHER ROAD ☐ Add Remove DUNEDIN FL 34698 MGRM JACK D HENRY 4106 VISTA VERDE DR. #1 NEW PORT RICHEY, FL 34655 Remove ☐ Add Remove ☐ Add Remove □Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **NOVEMBER 20** 2012 Dated Signature of a member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00