## L06000044624

(Re	equestor's Name)			
(Ac	ddress)			
(Ac	ldress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



900113732499

01/07/08--01035--029 \*\*60.00

DIVISION OF CORPORATIONS

ON JAN -7 PH 4: 01

J. BRYAN

JAN - 8 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Brandon White 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:
Brandon White (Name of Person)
Brandon White LLC (Firm/Company)
44172 Quail Ridge Dr 是智
44172 Quail Ridge Dr  (Address)  Callahan, Fl 32011 (City/State and Zip Code)  For further information concerning this matter, please call:
For further information concerning this matter, please call:
Brandon White at (904) 226-3043 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$ Certificate of Status \$55.00 Filing Fee \$ Certificate of Status \$ Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

Brandon Whi (Name of the Limited Liab) (A Flori	TE LLC ility Company as it now appears of da Limited Liability Company)	n our records.)	
The Articles of Organization for this Limited Liability Florida document number 上 Ø し め の の 4 4 し	·	<b>6</b> 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
This amendment is submitted to amend the following	;;	JAN - 7 PM	
A. If amending name, enter the new name of the l Best Choice Home Impro	ovements lle	F. O.	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company,	" the designation "LLC" or the abbreviation	
B. If amending the registered agent and/or registered agent and/or the new registered office a		records, enter 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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MER	Lonnie Murray	16473 Folk Hill Rd Hilliard, Fl 32046	Add Remove
<u>·</u>			A REMOVE SECRET
			Add Remark
			Add Remove
	<u></u>		Add Remove
<del></del>			Add Remove
D. If amendi	ing any other information, enter change(	s) here: (Attach additional sheets, if necessary.)	
1	am only needing to	change the name	<b></b>
Or	nd add another per	son onto my LLC.	neso
		Home Improvements LLC	
an	d names on UC sno	ould be Brandon White	-
<u>ar</u>	od Lonnie murray.		_
Dated	Signature of a member of	r authorized representative of a member	····
	Cynth ia	miller - Registered Ager rprinted name of signee	<del>tt</del>

Page 2 of 2

Filing Fee: \$25.00