

LD6000046050

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

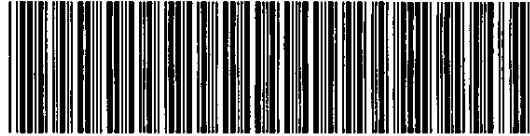
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan DEC 11 2015

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 3 Rivers 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:

Curt McDonald

Name of Person

3 Rivers Construction Services LLC

Firm/Company

4215 Snowy Egret Trail

Address

Orange Park, Florida 32073

City/State and Zip Code

3riverscs@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Curt McDonald

386 249-2074
at ()

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)

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**

FILED
2015 DEC 10 AM 11:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3 Rivers Construction Services LLC

(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 Liability Company were filed on 03 May 2006 and assigned
Florida document number L06000046050.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

6694 NW 31st Circle

Jennings, Florida 32053

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4215 Snowy Egret Trail

Orange Park, Florida 32073

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Curt McDonald

New Registered Office Address:

4215 Snowy Egret Trail

Enter Florida street address

Orange Park

City

, Florida 32073

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Deborah A. McDonald	6694 NW 31st Circle	<input type="checkbox"/> Add
		Jennings, Florida 32053	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Trevor Shaw	3525 Emmaus Road	<input type="checkbox"/> Add
		Valdosta, Georgia 31605	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Jason Rodriguez	1785 Selva Marina Drive	<input checked="" type="checkbox"/> Add
		Atlantic Beach, Florida 32233	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated December 8, 2015

Signature of a person

Signature of a member or authorized representative of a member

Curt D. McDonald

Typed or printed name of signee