## L06000057936

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12 FEB 29 PH I2: 05
SECRETARY OF STATE

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Franklin Key Hone's 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:
Benjamin F Thomas Name of Person
Franklin Key Hones LLC Firm/Company
144 My Way #3
Santa Rosa Beach, FL 32459
Santa Rosa Beach, FL 32459  City/State and Zip Code  Bentthonas H@gma: 1. com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Renjamb F Thomas at (850) 699 5994  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \$55.00 Filing Fee & \text{Certified Copy} & \text{(additional copy is enclosed)}\$
MAILING ADDRESS: STREET/COURIER ADDRESS:

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

TO;

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

12 FEB 29 PH 12: 05 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 June 7, 2006 and assigned Florida document number L040000 57936. This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: BFT Construction The new name must be distinguishable and end with 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

<u>Name</u>	Address	Type of Action
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		AddRemove
ng any other information, enter cl	nange(s) here: (Attach additional sheets	s, if necessary.)
		12 FEB 29 SECRETIVELY TALLAHASSE
		FILED 29 PH 12: 05 SSEE, FLORIDA

Page 2 of 2

Filing Fee: \$25.00