L060000 48807

(Re	questor's Name)	
	•	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
•		
(Bu	siness Entity Na	me)
•	•	•
(Do	cument Number	<u> </u>
Certified Copies	Certificate	s of Status
,		
Special Instructions to	Filing Officer	-
Special mediations to	Timing Cilicon	
		10-190
	Office Hee Or	RIVE



000080901440

10/17/06--01054--009 **25.00

06 OCT 17 PN 12: 18
SECRETARY OF STATE
ANASSEE. FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: <u>Maintenance</u> and Rg (Name of Limited Liability C	Company)		
Dear Sir or Madam:			
The enclosed Resignation of Member, Managing Member or	Manager and fee(s) are submitted for filing	ng.	
Please return all correspondence concerning this matter to the	e following:		
Mame of Person)			
		080	
(Firm/Company)	TORE!	CT -	7
971 Chamber 1:- Trail (Address)		7 PH1	
ST_ Clown FC 3 977 (City/State and Zip Code)	ORIDA	06 OCT 17 PM 12: 18	
For further information concerning this matter, please call:			
Name of Person) at (40)	ode & Daytime Telephone Number)		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount:			
\$25 Filing Fee	\$55 Filing Fee & Certified Copy		

CR2E079 (8/05)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

;	maintenance and Repair Solutions LCC	_
_	(Present Name) (A Florida Limited Liability Company)	
FIRST:	The Articles of Organization were filed on 7/11/06 and assigned document number 606000 688-07.	
SECOND:	This amendment is submitted to amend the following:	
	mr. IAma EndicoTT popoints Mr. Berry	
	Woney cutt many by member of the above	
	LLC. In addition me Immes Endicott	-
	resigns his position as manaying members	
	AHE CT	7
	PR PR	FILEU
	PH IZ: 18 SEF. FLORIDE	; -
	DATE OF)
Dated	10/12/06	
	Signature of a member or authorized representative of a member	
	Signature of a member or authorized representative of a member The Korol of Typed or printed name of signee	

Filing Fee: \$25.00