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TALLAHASSEF F. STATE

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: COMPASS DESIGN AND CONSTRUCTION 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:
MARCEL FERNANDEZ  (Name of Person)  COMPASS DESIGN AND CONSTRUCTION  (Firm/Company)
(Firm/Company)
749 ASHLEY LANE (Address)
ORLANDO, FL 3282 AR ASSET OF For further information concerning this matter, please call:
For further information concerning this matter, please call:
MARCEL FERNANDEZ at (32) - 299 - 652 W (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)}\$\$  Certified Copy \text{(additional copy is enclosed)}\$\$  \$60.00 Filing Fee, Certificate of Status & Certified Copy \text{(additional copy is enclosed)}\$\$
MAILING ADDRESS:  Registration Section  Registration Section  Division of Corporations

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

COMPASS DESIGN			
( <u>Name of the Limited Liabili</u> (A Florida	ity Company as it now appears on our r a Limited Liability Company)	ecords.)	
The Articles of Organization for this Limited Liability		9 - 2006 and assigned	
This amendment is submitted to amend the following:		ZOOR APR SECRETA	
A. If amending name, <u>enter the new name of the li</u> r		IN THE SEEF.	
The new name must be distinguishable and end with the w'L.L.C."	ords "Limited Liability Company," the de	signation LLC or the had eviation	
B. If amending the registered agent and/or registered agent and/or the new registered office ad		ds, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:	(Enter Florid	la 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 **Title** <u>Name</u> <u>Address</u> Type of Action MECHELLE FERNANDEZ ☐ Add Remove Add Remove □Add Remove □Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) D 4PRIL 2008 Dated Signature of a member or authorized representative of a member ARCEL FERNANDEZ Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00