## 107000010208

(Requ	estor's Name)	
(Addre	ess)	
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(City/S	State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Name)	
(Docu	ment Number)	
Certified Copies	Certificates of	Status
Special Instructions to Fili	ing Officer:	

Office Use Only



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SECRETARY OF STATE
ALL ANASSEE, FLORIDA

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## **COVER LETTER**

TO: Registration S Division of Co						
	ITRACTORS, LLC					
SUBJECT:	Name of Lin	nited Liability Company				
	Amendment and fee(s) are sub					
ricase return air corresp	RANDALL L. FRILOUX	to the following.				
		Name of Person				
	RLF CONTRACTORS,	LLC				
		Firm/Company				
	1124 O'DAY DRIVE					
	<del></del>	Address		$\mathbf{Z}_{\mathbb{Z}}$	<del>1</del> 8	
	WINTER SPRINGS, FL	32708		A.	8	_
	RANDY@RLFES.COM	City/State and Zip Code		Taigh IASSE	7 22	į
	<del>-</del>	to be used for future annual report notifi	ication)	English English	P	(
For further information	concerning this matter, please c	all:		OR II	ភ <u>ិ</u>	
RANDALL L. F	FRILOUX	407 399-3390		Ā	+	
Name (	of Person		Telephone Number			
Enclosed is a check for t	the following amount:					
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (	e of Status		
Regist Divisi	JING ADDRESS: reation Section on of Corporations Box 6327	STREET/COURIE Registration Section Division of Corpora Clifton Building	า			

Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RLF CONTRACTORS, 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 01/29/2007 and assigned Florida document number L07000010208 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: RLF ENGINEERED SOLUTIONS, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: ᇴ (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:

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

Zip Code

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>	Type of Action
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i an effect <b>Note:</b> - If	the date inserted i	date must be speci in this block does	fic and cannot not meet the	be prior to date e applicable sta	of filing or more t		<b>nal)</b> iling.) Pursuant to 605.02 date will not be listed :	
locumen	it's effective date	on the Departmen	nt of State's i	ecords.				
	rd specifies a c Oth day after t			out not an e	effective time	e, at 12:01 a.	m. on the earlier	of:
Dated	Octob 	er 17	20	<u> 218</u> .				
		2 11	1	<u> </u>				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00