## W7000012125

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PICK-UP WAIT MAIL					
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09/15/08--01016--001 \*\*25.00

T. CLINE

SEP 16 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration S Division of Co			
SUBJECT: AUL	F COAST PROY	DERTY MAINTENANCE ited Liability Company)	<u>- LC</u>
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		Rivers (Name of Person)  Property mainten (Firm/Company)	Ance I'C
	<u>4606</u> S	Scutheen PLACE (Address)	
	PACE	<b> </b>	- LE SE
For further information of	concerning this matter, please c		SEP 15 PH 1
Tohn	Pivers of Person)	at ( <u>\$\$\oldsymbol{S}\oldsymbol{O}\)                                    </u>	33
(rame	or reason,	(Alea code & Dayillie I	otopiono rumosty .
Enclosed is a check for t	he 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

(Name of the Limited Liability)	Ty paintenance LC Company as it now appears on our records.	)		
·	imited Liability Company)			
The Articles of Organization for this Limited Liability Co	ompany were filed on 2/1/07	and assigned		
Florida document number <u>Lo7000 /2/2</u>	<u>5</u>			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ted liability company here:			
The new name must be distinguishable and end with the word "L.L.C."	ds "Limited Liability Company," the designation	on "LLC" or the abbreviation		
L.L.C.		70 8		
Enter new principal offices address, if applicable:		5 5		
(Principal office address MUST BE A STREET ADDRI	ESS)	The transfer course		
		M - CT		
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)		gra o		
B. If amending the registered agent and/or registe registered agent and/or the new registered office address.		er the name of the new		
Name of New Registered Agent:				
New Registered Office Address:	(D			
	(Enter Florida street address)			
	, Florida	<del></del>		
	(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

<u> Citle</u>	<u>Name</u>	Address	Type of Action
MgR	wade Jones	41006 Southern Place PACE, 72 32571	Add Remove
<u>.</u>			Add Remove
			Add Remove
	<del></del>		Add Remove
			Remove
		ASST English	Add
). If amend	ing any other information, enter cl	hange(s) here: (Attach additional sheets, if necessary.	· · · · · · · · · · · · · · · · · · ·
			Mark.
Dated Sep	Itember 8.	2008.	
		mber or authorized representative of a member	
	=	yped or printed name of signee	. <u></u>

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Filing Fee: \$25.00