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B. KOHR

APR - 3 2008

EXAMINER



## COVER LETTER

SUBJECT:SO	UTHERN SUN BUILDERS	s, LLC	
-	(Name of Lin	ited Liability Company)	OR ARR 2 MIO. 10
The enclosed Articles of A	Amendment and fee(s) are sul	omitted for filing.	7 6
Please return all correspon	ndence concerning this matter	to the following:	SECOND IN
	Sherri Beeman		007
		(Name of Person)	
	SMITH, THOMPSON,	SHAW & MANAUSA	
		(Firm/Company)	
	3520 Thomasvill	e Road, 4th Floor	
		(Address)	
	Tallahassee, Fl	32309	
		(City/State and Zip Code)	
For further information co	oncerning this matter, please o	vall:	
Sherri Beemar	1	at ( 850 893-4105	
(Name o	f Person)	(Area Code & Daytime	(elephone Number)
Enclosed is a check for the	e 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:

TO:

Registration Section Division of Corporations

> 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**

ALCALASTO, SONO,

SOUTHERN SUN BUILDERS, 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	y Company were filed on	February 9, 2007 and assigned	
Florida document number	<del></del> •		
This amendment is submitted to amend the following	;;		
A. If amending name, <u>enter the new name of the l</u>	imited liability company her	<u>'e</u> :	
The new name must be distinguishable and end with the val.L.L.C."	words "Limited Liability Compa	ny," the designation "LLC" or the abbreviation	
B. If amending the registered agent and/or registered agent and/or the new registered office a	9	our records, <u>enter the name of the new</u>	
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter Florida street address)		
		Florida	
	(City)	, Florida(Zip Code)	
New Registered Agent's Signature, if changing Registe	ered Agent:		
I hereby accept the appointment as registered age the provisions of all statutes relative to the proper accept the obligations of my position as registerea being filed to merely reflect a change in the registe company has been notified in writing of this change	and complete performance dagent as provided for in Cl ered office address, I hereby	of my duties, and I am familiar with and hapter 608, F.S. Or, if this document is	

(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>	Address	Type of Action
MGRM	ROBERT MIXON	8782 Miles Johnson Tallahassee, Fl 32309	Add <b>X</b> Remove
			Add Remove
D. If amend	ing any other information, enter char	nge(s) here: (Attach additional sheets, if necessary.)	<del></del>
			_
			<del>-</del>
Dated	April 1 , 200	ler or authorized representative of a member	
_	James Hegler	•	
•	Туре	ed or printed name of signee	

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Filing Fee: \$25.00