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C LEW'S OCT 1 82010 EXAMBLES

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: AS 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:
AMADIA BUME Name of Person
Firm/Company
8815 CONROY-WINDERMEER RD
Delano FL 32835 City/State and Zip Code
ABLUME EB CFL & R. COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Amanda Blume at 407, 341, 1817 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount: Solution Soluti

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

FILEU

AJB CONSTR	auction LL	2010 OCT 15 PM (8)
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our record iability Company)	STATARY OF STAT
The Articles of Organization for this Limited Liability Company Florida document number	were filed on MARCH	s.) SECRETARY OF STAT HASSEE FLORI and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab The new name must be distinguishable and end with the words "Limit" "L.L.C."	SILC	tion "LLC" or the abbreviation
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	# 213 OPLANDO F	2 WINDERMER A
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SAME AS ABO)VE
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		nter the name of the new
Name of New Registered Agent: Blums	= Housings 11	C
New Registered Office Address: 8815 (# 213	LON ROY-WING Enter Florida stree	2000-
OLA	City, Florid	la SZSSS 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, hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

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:

(IVI)	Managing Member		
	<u>Name</u>	<u>Address</u>	Type of Action
			Add
			Persove
			/ n
			Add
			M Demoste
			Add
			77n
amei	nding any other information, enter ch	ange(s) here: (Attach additional shee	
-			PINOCT 15
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	9/13/2010 0		
- - 	9/13/2010		
 i	9/13/2010 0-	mber or authorized representative of a mo	BUME HOUDINGS

Page 2 of 2

Filing Fee: \$25.00