L07000033045

	(Requestor's Name)
 	(Address)
•	(Address)
	(City/State/Zip/Phone #)
PICK-UI	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instruction	

Special Instructions to Filing Officer:

A. LUNT

JUN 24 2009

EXAMINER

Office Use Only



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06/09/09--01036--014

**35.00

FILE U

NECKETARY OF STATE
SECRETARY OF STATE



June 11, 2009

DEWEY YOUNGBLOOD 6013 COUNTRY WALK LANE WINTER HAVEN, FL 33880

SUBJECT: DEWEY YOUNGBLOOD LLC

Ref. Number: L07000033045

We have received your document for DEWEY YOUNGBLOOD LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Letter Number: 409A00019820

Agnes Lunt Regulatory Specialist II

Division of Corporations - P.O. BOX 6327 -Tallahassee Florida 32314

COVER LETTER

TO: Registration Section Division of Corporations								
SUBJECT:								
The enclosed Articles of Amendment and fee(s) are submitted for filing.								
Please return all correspondence concerning this matter to the following:								
Maria Rizer								
Name of Person								
Firm/Company								
1123 Walt Williams Rd Lot 164								
Lakeland, FL 33809								
Chy/State and Zip Code								
E-mail address: (to be used for future annual report notification)								
For further information concerning this matter, please call:								
Name of Person at (863) 299-5040 Area Code & Daytime Telephone Number								
Enclosed is a check for the following amount:								
\$25.00 Filing Fee \$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed) 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

Devoed Vou	AGD Companion Limited L	y as it now appears on or iability Company)	ur records.) ZS			
The Articles of Organization for this Limited Liab Florida document number			AHASSEE.			
This amendment is submitted to amend the follow			STATE STATE	<i>گ</i>		
A. If amending name, enter the new name of the	<u>he limited liabi</u>	lity company here:	P	**		
Elite Stucco + Stone The new name must be distinguishable and end with "L.L.C."		ed Liability Company," th	e designation "LLC" or the abbrev	iation		
Enter new principal offices address, if applicable (Principal office address MUST BE A STREET		1123 Walt	Williams Rd Lot FL 33809	64 		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>0x)</u>	P.O. Br Eagle La	0x 686 Ke FC 33839	 		
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:	11/1	Enter Flo	orida street address			
•	1		. 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 = ME	Managing Member	TALS:	2009
<u>Title</u>	<u>Name</u>	Address LAHASSEE ASSEE ASSEE TARY O	Add
N/P	Υ	FLORIDA	Add Remove
			Add Remove
			Add Remove
STOTE OF Park I was an exemple.			Add Remove
			Add Remove
D. If amen		ge(s) here: (Attach additional sheets, if necessary.)	_
			<u> </u>
_	1/12/2009/7		- -
Dated	Janu Signature of membe	r or anthorized representative of a member	
	Maria S	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00