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| (Requestor's Name)                      |
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| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
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|   |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
| Solution copies                         |
|   |
| Special Instructions to Filing Officer: |
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SEGRETARY OF STATE
TALLAHASSEE, FLORIDA

106-1 AM 9: 4:

J. SAULSBERRY EXAMINER

AUG 2 2011

## **COVER LETTER**

|                     | istration Section<br>ision of Corporations   |                    |              |        |
|---------------------|--|--------------------|--------------|--------|
| SUBJECT:            | TK CONSTRUCTION, LLC   |                    |              |        |
| SOBJECT.            | 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:  |                    |              |        |
|                     | JOHN A. SPIEGEL  |                    |              |        |
|                     | Name of Person   | •                  |              |        |
|                     | TK CONSTRUCTION, LLC   |                    |              |        |
|                     | Firm/Company   |                    |              |        |
|                     | 12058 SAN JOSE BLVD. #1002   |                    |              |        |
|                     | Address  | ĕs                 | 三            |        |
|                     |  | L CR               | <b>=</b>     | 71     |
|                     | JACKSONVILLE, FL 32223  City/State and Zip Code  | AS<br>AS           | ZAII AUG - I | FILED  |
|                     |  | RY O               |              | l<br>H |
|                     | tkconstruct@yahoo.com  E-mail address: (to be used for future annual report notification)                              | F-5                | 云            |        |
| For further in      | formation concerning this matter, please call:   | TATE               | AM 9: 40     |        |
|                     | JOHN A. (JAY) SPIEGEL at ( 904 ) 553-9817  |                    |              |        |
|                     | Name of Person Area Code & Daytime Telephone Number  |                    |              |        |
| Enclosed is a       | check for the following amount:  |                    |              |        |
| \$25.00 Fi          | -  | na Fee             |              |        |
| <b>V</b> \$23.00 11 | Certificate of Status Certified Copy Certified  (additional copy is enclosed) Certified  (additional copy is enclosed) | e of Stati<br>Copy |              | sed)   |
|                     | MAH ING ADDRESS. STREET/OOURIER ADDRESS.   |                    |              |        |
|                     | MAILING ADDRESS: Registration Section Registration Section   |                    |              |        |
|                     | Division of Corporations Division of Corporations  |                    |              |        |

P.O. Box 6327 Tallahassee, FL 32314 Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the Limite   | K CONSTRUCTION, LLC<br>d Liability Company as it now appea<br>A Florida Limited Liability Company) | rs on our records.)              |               |          |         |
|---|--|----------------------------------|---------------|----------|---------|
| The Articles of Organization for this Limited I Florida document number10700006       | Liability Company were filed on  |                                  | and assigned  |          |         |
| This amendment is submitted to amend the fol  | lowing:  |                                  |               |          |         |
| A. If amending name, enter the new name   | of the limited liability company he  | <u>re</u> :                      |               |          |         |
| The new name must be distinguishable and end w "L.L.C."                               | rith the words "Limited Liability Comp   | any," the designation "          | LLC" or the   | e abbrev | viatio  |
| Enter new principal offices address, if appli   | cable:   |                                  | IACI<br>SE    | 72       |         |
| (Principal office address MUST BE A STRE  |  |                                  | A£<br>E       | ALIG     |         |
|   | _ <del></del>  |                                  | ASS.          | <u> </u> |         |
| Enter new mailing address, if applicable:   |  |                                  | Y OF S        | <b>≱</b> | in<br>E |
| (Mailing address MAY BE A POST OFFICE   | <u> </u>   |                                  | NAT OA        | 5        |         |
| B. If amending the registered agent and registered agent and/or the new registered of |  | our records, enter               | the name      | of the   | nev     |
| Name of New Registered Agent:   | <u> </u>   |                                  |               |          |         |
| New Registered Office Address:  | 12058 SAN JOSE BLVD. ‡   | #1002<br>nter Florida street add | dwana         |          | —       |
|   |  |                                  |               | 22       |         |
|   | JACKSONVILLE  City   | , Florida                        | 322<br>Zip Co |          |         |
|   |  |                                  |               |          |         |

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

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:

MGR = Manager MGRM = Managing Member <u>Title</u> <u>Address</u> **Type of Action** <u>Name</u> MGRM LINWOOD BURDEN 12058 SAN JOSE BLVD. #1002 ✓ Add ☐ Remove JACKSONVILLE, FL 32223 MGRM JOHN A. SPIEGEL 12058 SAN JOSE BLVD. #1002 ✓ Add JACKSONVILLE FL 32223 Remove ☐ Add Remove Add Remove ∏Add Remove ∏Add . ☐ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

JULY 29

Signature of a member or authorized representative of a member

JOHN A SPIEGEL

Typed or printed name of signee

Page 2 of 2

Dated\_

Filing Fee: \$25.00