L0700067135

(Requestor's Name)				
(Ac	idress)			
(Ac	ldress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



100105085041

07/03/07--01029--006 **25.00

07 JUL -3 PH 1: 4

SECRETARY OF STATE

COVER LETTER

Division of Co					
SUBJECT: South	eastern Siding and	Trim, LLC			
30 202 01.		nited Liability Company)			
The enclosed Articles of Amendment and fee(s) are submitted for filing.					
Please return all corresp	ondence concerning this matter	r to the following:			
	Rob O'Farreil				
		(Name of Person)			
	Law Offices of Rol	b O'Farrell, PA			
		(Firm/Company)			
	2006 North Harbon	ur Drive			
		(Address)			
Lynn Haven, FL 32444					
(City/State and Zip Code)					
For further information concerning this matter, please call:					
Rob O'Farrell		at (850) 271-1596			
Rob O'Farrell at (850) 271-1596 (Area Code & Daytime Telephone N		e Telephone Number)			
Enclosed is a check for the	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

	Southeastern Siding and Trim, LLC		
	(Present Name) (A Florida Limited Liability Company)		
FIRST:	The Articles of Organization were filed on document number <u>L07000067135</u> and assigned		
SECOND:	This amendment is submitted to amend the following:		
	Correct the spelling of the registered agent's name from; William E. Sondren ,III to William E. Fondren, III	>	
		•	
		•	
		_	DIV.
Dated	7/01/07	الل 70	SECRET
Dateu	· (· · · · · · · · · · · · · · · · · ·	ယ်	FARE CAR
	Rob Hall	PH 1: 4	400 XI
	Signature of a member or authorized representative of a member		<u></u>
	LOD O Farrya		
	Typed or printed name of signee		

Filing Fee: \$25.00