L07000080014

(Requesto	r'e Nama)
(Requestor	's Name,
(Address)	
(Address)	
(City/State	/Zip/Phone #)
PICK-UP	WAIT MAIL
(Pusinoss	Entity Name)
(business	Entity Name)
(Documen	t Number)
Certified Copies	Dertificates of Status
Special Instructions to Filing C	Officer:
Special Instructions to Filling C	MICEI.
	ŀ

Office Use Only



000251623480

09/13/13--01003 -012 **25.00

2013 SEP 13 MM II: 37 SECRETARY OF STATE

COVER LETTER

TO: Regi

Registration Section
Division of Corporations

SUBJECT

AMERICAN ALUMINUM CONTRACTORS, 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:

David Murphy

Name of Person

American Aluminum Contractors, LLC

Firm/Company

1202 13th Street North

Address

Saint Petersburg, Florida 33705

City/State and Zip Code

nkeirn@tampabay.rr.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Murphy

...727、421-9013

Name of Person

Area Code & Daytime 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

FILED
2013 SEP 13 AM II: 37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AMERICAN ALUMINUM CONTRACTORS 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	Company were filed on 8/3/20	and assigned
Florida document number L07000080014	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and end with the w "L.L.C."	vords "Limited Liability Company,	" the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADI	DRESS)	<u></u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or reg registered agent and/or the new registered office ac		records, enter the name of the new
Name of New Registered Agent:	·	
New Registered Office Address:		
	Enter	Florida street address
<u> </u>		, 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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Joshua A. Murphy	1118 13th St. N. (UPPER)	_ 🗹 Add
		Saint Petersburg, Florida	Remove
		33705	_
MGRM	Joseph M. Hornbeck	4221 44th Avenue North	Add
		Saint Petersburg, Florida	Remove
		33714	
			Add .
			Remove
			_
			Add
			Remove
			_
			Add
		- <u>-</u>	Remove
			_
		· 	Add
			Remove

D. 'If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated Septem Book 10th, 2013.
Almost Me
Signature of a member or authorized representative of a member
David Murphy 🗸
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

