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SECRETARY OF STATE
ALLAHASSEF FLORING

D. BRUCE

JUL 07 2009

EXAMINER

COVER LETTER

TO: Registration Division of	on Section f Corporations		. 1
SUBJECT:	BML SERVICES, LLC		
	Name of Limited Liability Company		
The enclosed Article	es of Amendment and fee(s) are submitted for filing.		
Please return all cor	respondence concerning this matter to the following:		
	Bradley M. Locke Name of Person		
BML Services, LLC			
Firm/Company			
1101 Hillwood Drive			
Address		TAES O	
Sanford, FL 32771		GCRETAF LAHAS	1
City/State and Zip Code			
Northwoodsmss@aol.com E-mail address: (to be used for future annual report notification)			m
	•	AM 8: OF ST	Ö
For further informat	ion concerning this matter, please call:	FATE	_
	Bradley M. Locke <u>at (321)</u> 299-5782	A .	
N	ame of Person Area Code & Daytime Telephone Number		
Enclosed is a check	for the following amount:		
\$25.00 Filing Fe	S30.00 Filing Fee & Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		osed)

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 30, 2009

BRADLEY M. LOCKE 1101 HILLWOOD DRIVE SANFORD, FL 32771

SUBJECT: BML SERVICES, L.L.C.

Ref. Number: L07000084932

3ECRETARY OF STATE TALLAHASSEE, FLORIDA

We have received your document for BML SERVICES, L.L.C. and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 209A00022458

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RMI SERVICES LLC

(Name of the Limited Liability Comps (A Florida Limited)	nny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on AUGUST 17, 2007 and assigned
Florida document number <u>L07000084932</u>	Acc. 6
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab	SECRETARY ALLAHASSE
A. If amending name, enter the new name of the minted half	I C
USSITIED, L	
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company," the designation "Lightor the abbreviation
Enter new principal offices address, if applicable:	1101 Hillwood OR
(Principal office address MUST BE A STREET ADDRESS)	Surtous, PC 20/11
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1101 Hillwood Dr Sandford, Fl 32.771
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	
Name of New Registered Agent:	
Nov Projetomed Office Address	
New Registered Office Address:	Enter Florida street address
	179

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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 **Title** <u>Name</u> **Address Type of Action** JEREMY PENDRY MGRM Remove KRIS SCHNEIDER MGRM ☐ Add Remove \square Add ☐ Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Bradley M. Locke

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee