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SECRETARY OF STATE

D. BRUCE
MAY 0 4 2009
EXAMINER

COVER LETTER

TO:	Registration Sec Division of Corp				
SUBJE	CT:	J.A.S. Constr	ruction Services, LLC		
33232			ited Liability Company)		
The end	closed Articles of A	Amendment and fee(s) are sub	omitted for filing.		
Please 1	return all correspoi	ndence concerning this matter	to the following:		
		Joseph A	. Spetla, Jr.		
			(Name of Person)		
		J.A.S. C	onstruction Services	, LLC	
			(Firm/Company)	·	AZ 8
		14883 Hamlin Blvd.			HI - 109 MAY - SECRETA SECRETA
			(Address)		TAR TAR
		Loxahatc	hee, FL 33470		RY OF S
			(City/State and Zip Code)		L 2: 2: STAT FLORI
For furt	ther information co	oncerning this matter, please o	eall:		29 ATE RIDA
	Joseph A.	. Spetla, Jr.	at (561) 784-2828 (Area Code & Daytime T		
	(Name o	f Person)	(Area Code & Daytime T	elephone Numbe	r)
Enclose	ed is a check for th	e following amount:			
\$2 5.	.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &
Registration Division of P.O. Box 63		NG ADDRESS: ation Section to of Corporations to 6327 ssee, FL 32314	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, FL 32301	ons r Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

J.A.S. Const	ruction Serv	rices, LLC	
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appointed Liability Company	ears on our records.	
The Articles of Organization for this Limited Liability Com	pany were filed on _	09/07/2007	and assigned
Florida document numberL07000091712			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company h	<u>ere:</u>	
J.A.S. Construc	ction, LLC		
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Corr	pany," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable:			09 TALL
(Principal office address MUST BE A STREET ADDRES	<u></u>		AN S
			AR SSS
•			## 32 (77)
Enter new mailing address, if applicable:			S N D
(Mailing address MAY BE A POST OFFICE BOX)			AI 2
	•		D
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		our records, <u>enter</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:			<u></u>
	•	Enter Florida street d	address)
		, 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 = M MGRM =	anager Managing Member		
<u>Title</u>	Name	Address	Type of Action
·			Add Remove
			Add Remove
D. If amer	iding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessa	P SECRET
-			ARY OF STATE
Dated	April 30 , 20	 -	7E 29
		r or authorized representative of a member	
		h A. Spetla, Jr.	
	1 yped	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00