L07000105114

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
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(Business Entity Name)			
(Busiliess Elitty Harrie)			
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SECRETARY OF STATE

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T. HAMPTON

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EXAMINER



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MILANUS E, ROTE

June 26, 2008

GLOTEC LIMESTONE AGGREGATE, LLC P O BOX 770008 ORLANDO, FL 32877

SUBJECT: GLOTEC LIMESTONE AGGREGATE, LLC

Ref. Number: L07000105114

We have received your document for GLOTEC LIMESTONE AGGREGATE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or manager of the limited liability company.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton Regulatory Specialist II Registration/Qualification Section

Letter Number: 808A00038494

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ggregate LLC FR ST
y as itolow appears on our records.) ability Company)
were filed on October 16, 2007 Find assigned
lity company here:
ed Liability Company," the designation "LLC" or the abbreviation
2615 N. ORANGE BLOSSOM TRAIL
KISSIMMEE, FL. 34744
P.O. Box 110008 ORLANDO, FL. 32877
<u> </u>
ice address on our records, enter the name of the new:
·
(Enter Florida street address)
(City), Florida (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, 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>Name</u>	Address	Type of Action	
MANAGER -	KEITH A. GOODEN	3514 ENTRADA DR ORLANDO, FL32837	Add Remove	
MANAGER	GLADSTONE.D. HAY	2912 MAPLELEAF DR KISSIMMEE, FL 34744	⊠ Add ☐ Remove	
M <u>anage</u> r	JEROME. A. WILLIAMS	2840 BERKSHIRE CIRCLE KISSIMMEE, FL 34743	∄ Add Remove	
·	· ,		Add Remove	
			Add Remove	
			Add Remove	
D. If amendi	ng any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)		
		ALLAHASSEE, FL	FILED SECRETARY OF ST	
Dated 07-	15-2008 Signature of a receptor	of authorized-representative of a member) III: 51	
-	ZZoyz Typed c	D. M. LEAN or printed name of signec		

Page 2 of 2

Filing Fee: \$25.00