L07000107787

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J. BRYAN

SEP 1 8 2008

EXAMINER

COVER LETTER

, Division of Cor	porations				
SUBJECT. GENER	RAL PROPERTY RE	PAIRS LLC	11 .		
SUBJECT: GENERAL PROPERTY REPAIRS LLC (Name of Limited Liability Company)					
•					
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing			
•					
Please return all correspo	ondence concerning this matter	to the following:			
	ELENA BADIE				
		(Name of Person)			
	GENERAL PROPERTY	REPAIRS LLC	OB SEP 17 AM 11: 20		
		(Firm/Company)			
			二 完		
	153 HERCULES DR				
		(Address)			
	FT. MYERS BEACH, FLO	ARIDA 33031	:2		
	FI. WITERS BEACH, FE	(City/State and Zip Code)			
For further information of	concerning this matter, please c	all:			
ELENA BADIE		at (786) 357-5551			
(Name	of Person)	(Area Code & Daytime T	'elephone Number)		
Enclosed is a check for t	he following amount:				
□ \$25.00 Filing Fee	□\$30.00 Filing Fee &	☑\$55.00 Filing Fee &	\$60.00 Filing Fee,		
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy		
		((additional copy is enclosed)		
	ING ARRESC		A DIDIDECC.		

MAILING ADDRESS:

TO:

Registration Section

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



GENERAL PROPERTY REPAIRS LLC	ony ac it now annears on our	r records)
(Name of the Limited Liability Compa (A Florida Limited)	Liability Company)	,
The Articles of Organization for this Limited Liability Company Florida document number L07000107787	were filed on 10/24/2007	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the	designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
	153 HERCULES DR	
Enter new mailing address, if applicable:		1 ODIDA 22024
(Mailing address MAY BE A POST OFFICE BOX)	FT. MYERS BEACH, F	LORIDA 33931
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address here.		ords, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:	(Enter Flo	rida stylet 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 = Ma MGRM = 1	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
	<u> </u>		Add Remove
			Add Remove
			Add Remove
_/			Add Remove
D. If amer	ding any other information, enter cha	nge(s) here: (Attach additional sheets, if necessar)).)
			SECRETARY DIVISION OF C
			OFF STATE ONS ORPORATIONS
management	, ,	Dodi	· ** ***
	Signature of a mem ELENA BADIE Typ	her of authorized representative of a member bed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00