Lo7000/22044

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SECRETARY OF STATE
SECRETARSSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Naples Construction Group 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:	
Loukas Pallis	
(Name of Person)	
Naples Construction Group LLC (Firm/Company)	
1045 Port Orange Way (Address)	ו••
Naples Florida 34120	_
(City/State and Zip Code) For further information concerning this matter, please call:	
Loukas Pallis at (201) 814 - 965 (Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
∴\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{\$\subseteq}\$\$\$ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{\$\subseteq}\$\$\$ \$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

Naples Construction Group LLC	
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our records.) la Limited Liability Company)
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	a similed statemy company)
The Articles of Organization for this Limited Liability	Company were filed on 12/07/2007 and assigned
Florida document number <u>L07000122044</u>	 -
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the li	mited liability company here:
Buildout Solutions, LLC	
The new name must be distinguishable and end with the w	words "Limited Liability Company," the designation "LLC" or the abbreviation
"L.L.C."	
B. If amending the registered agent and/or reg	istered office address on our records, <u>enter the name of the new ddress here</u> :
Name of New Registered Agent:	TAX.
Name of New Registered Agent.	
New Registered Office Address:	In C
	(Enter Florida street address)
	, Florida
	(City) Zip Code)
New Registered Agent's Signature, if changing Register	red Agent:
I hereby accept the appointment as registered agen	nt and agree to act in this capacity. I further agree to comply with

(If Changing Registered Agent, Signature of New Registered Agent)

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:

<u>łe</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			AddRemove
If amen	ding any other information, enter c	change(s) here: (Attach additional shee	7000 JA TALLAHA
			NII P 3: SEEE FLORID
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ted		/ .	

Page 2 of 2

Filing Fee: \$25.00