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D. BRUCE

JAN 31 2008

**EXAMINER** 

## **COVER LETTER**

Division of Corporations		
SUBJECT: CARPENTRY by ROGER LLC. (Name of Limited Liability Company)		
(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:		
Roger B. BEAll (Name of Person)		
SAME		
(Firm/Company)		
1280 EMMEL Rd-Box 154 (Address)  CASSADAGA FL 32706 (Cfty/State and Zip Code)		
ASSE STATE		
(Cfty/State and Zip Code)		
$\mathbf{z}$		
For further information concerning this matter, please call:		
Roger BEAII at (386) 473-9672 (Name of Person) (Area Code & Daytime Telephone Number)		
(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 & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}		
MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section		
Division of Corporations P.O. Box 6327  Registration Section Registration Section Registration Section Registration Section Registration Section		
Tallahassee, FL 32314  Chilon Building  2661 Executive Center Circle  Tallahassee, FL 32301		

Appropriate State State State

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited L	Ability Company as it now appears on our orida Limited Liability Company)	LLC r records,)	
The Articles of Organization for this Limited Liabi Florida document number <u>LO &amp; DOO DO</u>	ility Company were filed on 1/9	2008 and assigned	
This amendment is submitted to amend the following	ing:		
A. If amending name, enter the new name of the FINISH CARPENTRY The new name must be distinguishable and end with the "L.L.C."  B. If amending the registered agent and/or registered agent and/or the new registered office	he words "Limited Liability Company," the	ords, enter dername of the new	
Name of New Registered Agent:		STATE STATE	
New Registered Office Address: (Enter Florida street address)			
-	((!i.,.)	_, 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 = N	nnager Managing Member		
<u> Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
·····			Add Remove
			Add Remove
			Add Remove
<del></del>	-		Add
		<del></del>	AddRemove
D. If amen	ding any other information, enter ch	ange(s) here: (Attach additional shee	ets, if necessary.)
_			
_			JAN 31
Dated	Hoger Dow	ber or authorized representative of a me	FE STATE TO STATE OF THE STATE
	ROGER B. BC	nber or authorized representative of a me  A- // ped or printed name of signee	<del></del>

Page 2 of 2

Filing Fee: \$25.00