From: Roman Albano 10/29/13



Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850) 617-6393

From:

Account Name : CONTRACTORS REPORTING SERVICES, INC.

Account Number : 120050000099

: (813)932-5244

Fax Number

: (813)932-3782

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Addr	ess	:
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SESIN RESTORATION & CONTRACTING, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

From: Roman Albano 10/29/13 Fax: +1 (813) 445-7083

To: Jeraline

Fax: +1 (850) 245-6030 Division of Corporations Page 3 of 6 11/1/2013 2:32

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From: Roman Albano

Fax: +1 (813) 445-7083

To: Jeraline

Fax: +1 (850) 245-6030

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((([II130002403613)))

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SESIN RESTORATION & CONTRACTING, 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:

ANTHONY M. SESIN

Name of Person

CONTRACTORS REPORTING SERVICE, INC

Firm/Company

13795 N NEBRASKA AVE

Address

TAMPA, FL 33624

City/State and Zip Code

Foman@activatemylicense.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROMAN ALBANO

at (813) 932-5244

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fee,
Certificate of Status &
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

Fax: +1 (813) 445-7083

To: Jeratine

Fax: +1 (850) 245-6030

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

SESIN RESTORATION & CONT. (Name of the Limited Liability Company as it no	RACTING, LLC	<u></u>
(A Florida Limited Liability Co	ompany)	
The Articles of Organization for this Limited Liability Company were filed	d on 2/6/2008	and assigned
Florida document number L08000013410		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability comp	pany here:	
PRECISION ENVIRONMEN	TS LLC	
The new name must be distinguishable and end with the words "Limited Liabili "L.L.C."	ty Company," the designation "LL	.C" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
•		म ८ । क्रम अभिनेत्र
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		(A)
	(A)	
	, i.e.	Si do Esseria
B. If amending the registered agent and/or registered office address here:	ress on our records, enter the	
Name of New Registered Agent:		
New Registered Office Address:		
·	Enter Florida street addre	255
	, 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

Eramai	Roman	Albana	

MGR = Manager

Fax: +1 (850, 245-6030 Page 6 of 6 11/1/2013 2:32 (((H13000240361 3)))

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>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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Dated	OCTOBER 29 20	113	
		$\left(\begin{array}{c} + \\ - \end{array} \right)$	
	Signature of a nyember	of authorized representative of a member	
		ROMAN ALBANO	
		or printed name of signee	