1080000 15915		
(Requestor's Name) (Address)	500136556215	
(City/State/Zip/Phone #)	10/14/0801014001 **25.00	
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	CHEED CHEET ILL AN ID: 53 SECRETARY CONTENTS IALLAN ASSEE, FLORIDA	
́.	دى	
Office Use Only		

M. THOMAS OCT 1 5 2008 EXAMINER



## **COVER LETTER**

TO: Registration Section ' Division of Corporations

# SUBJECT: MCKENZIE CONSTRUCTION & SITE DEVELOPMENT, 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:

**OLIVER FERNANDEZ III** 

(Name of Person)

(Firm/Company)

9220 OAK PRIDE CT

(Address)

TAMPA, FL 33647

(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN MARCUM CPA

(Name of Person)

at ( 813 ) 932-+9481

(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 ÷



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

# McKENZIE CONSTRUCTION & SITE DEVELOPMENT, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on	02-13-08	and assigned
Florida document number L08000015915		

This amendment is submitted to amend the following:

### A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

> 9220 OAK PRIDE CT TAMPA, FL 33647

> 9220 OAK PRIDE CT

TAMPA, FL 33647

Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRE	SS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

h<mark>e new</mark> B. If amending the registered agent and/or registered office address on our records, enter the name registered agent and/or the new registered office address here:

Name of New Registered Agent:	OLIVER D FERNANDEZ III	
New Registered Office Address:	9220 OAK PRIDE CT	<b>.</b>
······································	(E	nter Florida street address)
	ТАМРА	, Florida <u>33647</u>
	(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.

10/6/08 (If Changing Registered Agent/Signature of New Registered Agent)

Page 1 of 2

L

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager</u> or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

.

.

<u>Title</u>	Name	Address	Type of Action
MGRM	RIVERA, EDWIN		∎ Add ⊡ Remove
MGRM	FERNANDEZ, OLIVER		∎ Add ∎ Remove
			Add Remove
	. <u></u>		Add Remove
	<u></u>		Add Remove
<u> </u>			Add Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated 10 6 08	SECRETARY OF STATE	On not
---------------	--------------------	--------

Filing Fee: \$25.00