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(Ke	equestor's Name)	
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	WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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FILED 08 DEC -8 PH 1:26 SEORETARY OF STATE MALLAHASSEE, FLORIDA

Office Use Only

D. BRUCE DEC - 9 2008 EXAMINER

SUBJECT: Constr	Uction Management (Name of Lim	Services, LLC lited Liability Company)	<u></u>	B
	Amendment and fee(s) are sul	<u> </u>		
	Richard Britton	(Name of Person)		
	Britton Law Offices, LLC			
	····	(Firm/Company)		
	2124 Park Street	(Address)		
	Jacksonville, FL 32204	•	, <u></u>	08 74L
For further information c	concerning this matter, please c	(City/State and Zip Code) all:		CALLAS
Richard Britton		at (_904) 389-1994		-8 PM SEE, FL
(Name	of Person)	(Ares Code & Daytime T	elephone Number)	D PN 1:2 STATE FLORIDA
Enclosed is a check for t	he following amount:			2
21 \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Solution Certificate of Solution Certificate of Solution Certified Copy (additional copy	tatus &
		·~ · ·		

COVER LETTER

MAILING ADDRESS: Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section Division of Corporations

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

Construction Management Services, 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 February 21, 2008 and assigned

Florida document number 1.08000018913

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 "LLC."

Enter new principal offices address, if applicable:	
(Principal office address MUST_BE A STREET ADDRESS)	8
Enter new mailing address, if applicable:	
(Malling address MAX BE A POST OFFICE BOX)	
	TTE 26

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered office address here:

Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	(Enter I	Florida street 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)

Page 1 of 2

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

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Title	Name	Address	Type of Action
MGL	JEFFRey BAGDON	209 Storian CT. Poste Vietna Bereit FC 3200	Remove
			Add Remove
MGR	Paul Frase	124 Crossroad Lakes P Ponte Vedra Brach, FL	Add Remove 32-082
·			Add Remove
d			Add Remove
- 112			Add Romove
D. If amend	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
 Dated			FILE
		r authorized representative of a member	\ \
	Jody M Typed or	printed name of signee	28



Filing Fee: \$25.00

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