

L0800000/9069

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Amend

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 JUN 27 AM 8:10

FILED

J. SAULSBERRY
EXAMINER
JUN 28 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Nalepa Construction 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:

Jason Nalepa
Name of Person

Nalepa Construction LLC
Firm/Company

2743 Wooddale dr
Address

Middleburg FL 32068
City/State and Zip Code

Nalepa Construction LLC@yahoo
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jason Nalepa at 904 993-7262
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

RECEIVED
TALLAHASSEE
OFFICE OF THE
CLERK OF THE
STATE

2013 JUN 29 AM 8:10

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

Nalepa Construction 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 2/21/2008 and assigned Florida document number LO8000019069

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."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2743 Woodsdale Dr
Middleburg FL, 32068

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

Name of New Registered Agent:

New Registered Office Address:

2743 Woodsdale Dr

Enter Florida street address

Middleburg, Florida 32068
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:

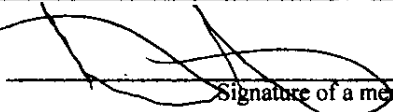
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Michael Bloom	10209 Leeward Ct Fleming Island, FL 32003	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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CLERK OF DISTRICT COURT

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

Dated June 20, 2013.



Signature of a member or authorized representative of a member

Jason Nalepa

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA