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## **COVER LETTER**

	ion Section of Corporations		
SUBJECT:	Name of Lim	15E CONTRACTING ited Liability Company)	LLC_
The enclosed Artic	les of Amendment and fee(s) are sul	bmitted for filing.	
Please return all co	rrespondence concerning this matter	r to the following:	
	ANDREL	Name of Person)	99 FE
		(Firm/Company)	09 FEB 25 MM M: 10 SECRETARISEE, FLORIDE TALL MASSEE, FLORIDE
	819 E	KICKLIGHTER R	A PORT STATE OF THE PORT OF TH
	LAKE	HELEN FL 33" (City/State and Zip Code)	)444
For further informa	ation concerning this matter, please of	call:	
ANDRE	WHITEHOUSE Name of Person)	at ( <u>386)</u> <u>747 - 7</u> (Area Code & Daytime T	17/ Celephone Number)
Enclosed is a check	s for the following amount:		
\$25.00 Filing F	Tee □\$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 enciosed)

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

WHITEHOUSE	CONTRACTING	LLC	
( <u>Name of the Limited Liability Con</u> (A Florida Limit	mpany as it now appears on ted Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Comp	pany were filed on <u>FEB</u>	. 29, 2008 and assigned	
Florida document number <u>L08000031936</u> .			
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 "lul.L.C."	Limited Liability Company,"	the designation "LLC" or the abbeviation	
Enter new principal offices address, if applicable:		25	
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	A STATE OF THE STA	
		FLORE R. 10	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
		<u> </u>	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		records, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter 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 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>	Address	Type of Action
MGRM (5150	KEVIN WHITEHOUSE	819 E. KICKLIGHTER RD. LAKE HELEN, FL 32744	Add Remove
<u>mg</u> ran (4290	ANDREW WHITEHOUSE OWNERSHIP)	EIGE KICKLIGHTER BD. LAKE HELEN, FL 32744	Add Remove
MEMBER (790	BARBARA WHITEHOUSE OWNERSHIP)	819 E. KICKLIGHTER RD. LAKE HELEN, FL 32744	Add Remove
			Add Remove
			Add Remove
			ALL Removes
D. If amend	ling any other information, enter change(	(s) here: (Attach additional sheets, if necessary.)	AM ES: 10  OF STATE FLORIDA
<u></u>			_
			<del></del>
Dated	Signature of a member of	8	·
	Andrew	White Loose r printed name of signee	

Page 2 of 2

Filing Fee: \$25.00