## L080000 25467

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT	MAIL	
(Business Entity Name)	······	
(Document Number)		
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03/11/09--01029--011 \*\*25.00

M. THOMAS

MAR 2 4 2009

**EXAMINER** 

## **COVER LETTER**

Division of Cor	porations				
SUBJECT: <u>DRYWA</u>	LL ASSEMBLIES LLC (Name of Lim	ited Liability Company)		Đ	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	endence concerning this matter	to the following:			
	TIMOTHY PAGEL				
		(Name of Person)			
		(Firm/Company)			E
	4095 SE 38 LOOP	(Address)			
	Ocala, FL 34480	(.188.633)		= -	
		(City/State and Zip Code)	<del></del>	O MA	
For further information c	oncerning this matter, please c	all:		R 24 TARY C	
TIMOTHY PAGEL (Name of	of Person)	(Area Code & Daytime To	elephone Number)	O9 MAR 24 AM 10: 19 SECRETARY OF STATE ALLAHASSEE, FLORIDA	<i>"</i>
Enclosed is a check for the	ne 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 Certificate o Certified Co (additional c	f Status &	

MAILING ADDRESS:

TO:

**Registration Section** 

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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 12, 2009

TIMOTHY PAGEL 4095 SE 38 LOOP OCALA, FL 34480

SUBJECT: DRYWALL ASSEMBLIES LLC

Ref. Number: L08000025467

We have received your document for DRYWALL ASSEMBLIES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, on it is not distinguishable from the name of an existing entity. Section 608.40 Florida Statutes, was amended effective July 1, 2007, to require the name of limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas Regulatory Specialist II

Letter Number: 309A00008492

Division of Corporations - P.O. BOX 6327 - Tallahassee Florida 32314

## ARTICLES OF AMÉNDMENT TO ARTICLES OF ORGANIZATION OF

DRYWALL ASSEMBLIES LI (Name of the Limited L (A I	C. iability Compar lorida Limited L	ny as it now appears on out iability Company)	r records.)	
The Articles of Organization for this Limited Lia Florida document number 1.08000025467		were filed on <u>03/11/200</u>	8 and assigned	
	₹			
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	he limited liabi	ility company bere:		-
PAGEL CONSTRUC <del>TION LLC -</del>	TIM	PAGEL	CONSTRUCTIO	NC
The new name must be distinguishable and end with "L.L.C."	the words "Limit	ted Liability Company," the	designation "LLC" or the abbrevia	tion
Enter new principal offices address, if applical	ble:	4095 SE 38 LOOP		_
(Principal office address MUST BE A STREET ADDRESS)		Ocala, FL 34480	<b>⊼</b> ∞	_
			FG ₹	
Enter new mailing address, if applicable:		4095 SE 38 LOOP	IR 24 ETARY O HASSEE.	
(Mailing address MAY BE A POST OFFICE BOX)		Ocala, FL 34480	FLOOR S	_U
			OFILE STATE	<del>-</del>
B. If amending the registered agent and/or registered agent and/or the new registered offi			ords, enter the name of the a	<u>new</u>
Name of New Registered Agent:		2- V.J.L.		<del></del>
New Registered Office Address:	4095 SE 38 LG			
		(Enter Florida street address)		
	Ocala	(Cin.)	_, Florida 34480	_
		(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>	Name	Address	Type of Action	
MGR	Wendy Peters	4095 SE 38 LOOP Ocala, FL 34480	Add Remove	
			Add Remove	
<del>-, - 11 }</del>			09 MAR 24	
			Zt AH IO:	
			Add Remove	
			Add Remove	
D. If ame	ending any other information, ente	r change(s) here: (Attach additional sheets, if nec	essary.)	
-				
- -	2 / 10 / 2 5			
Dated	Jimoto Pa	member or authorized representative of a member  PAGHL  Typed or printed name of signee		
	Timothy J	PAS + L  Typed or printed name of signee	<del></del>	

Page 2 of 2

Filing Fee: \$25.00