L08000033104

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
, (Bu	isiness Entity Nar	ne)
(Do	ocument Number)	_
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

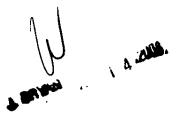
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SECRETARY OF STATE DIVISION OF CORPORATIONS



J. BRYAN

APR 2 2 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: A S KM Buildit, 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:	
Anthony R. Martin (Name of Person)	
ARM Structural Inc. (Firm/Company)	9 g
(Address) P.O. Box 654504	VISION OF 2
Miami, FL 33265 (City/State and Zip Code)	FILED STATE ARY OF STATE OR CORPORATIONS
For further information concerning this matter, please call:	
Anthony Martin (Name of Person) at (305) 669-4244. (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount: \$25.00 Filing Fee \$\times \text{S25.00 Filing Fee & Certificate of Status}\$ Certified Copy (additional copy is enclosed) \$60.00 Filing Fee & Certificate of Certified Copy (additional copy is enclosed)	of Status &

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 14, 2008

ANTHONY R. MARTIN ARM STRUCTURAL INC. PO BOX 654504 MIAMI, FL 33265

SUBJECT: A S K M BUILDIT, LLC. Ref. Number: L08000033104



We have received your document for A S K M BUILDIT, 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 registered agent must have a Florida street address. A post office box is not acceptable.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 508A00021975

ARM STRUCTURAL, INC.

Dear Mr. Bryan

We are sending all of the Amendment forms again per your request. We have included

9 FL street address for the registered agent.

The above check # 10619 for \$25.00 was marked with the original mailing. If there are any problems please contact me at (305) 669-4244.

Thank you,

Anthony Martin.

10619

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



ASKM	Buildit	LLC	STORY.
(<u>Name of the Limited</u> (A	Liability Company as it now Florida Limited Liability Com	pany)	
The Articles of Organization for this Limited Li Florida document number 8 pp		n 4/1/08	and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of ARM Bulder The new name must be distinguishable and end with "L.L.C."	-s LLC		.C" or the abbreviatio
B. If amending the registered agent and/or registered agent and/or the new registered of		on our records, <u>enter th</u>	e name of the nev
Name of New Registered Agent:	Anthony	R. Marti	<u>n</u>
New Registered Office Address:	3616 S.W.	108 Avenue (Enter Florida street addr	tage)
	Miami	Enter Florida street daar Florida 3	3165
	(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, enter the title, name, and address of each Manage or Managing Member being added or removed from our records:

MGR = Ma MGRM = N	nager Nanaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
		***************************************	Remove
			Add
			Remove
			Add
			Kemove
			Add Remove
			Add
			APR 2
			RATE OF THE PROPERTY OF THE PR
			STATE
D. If amend	ling any other information, enter chan	ge(s) here: (Attach additional sheets, if necessor	ary.)
			
			<u> </u>
 -			
Dated			
	Signature of a membe	er or authorized representative of a member	
	Anthony R. 1	1 ar Vin	

Page 2 of 2

Filing Fee: \$25.00