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EXAMINER

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COVER LETTER

	on Section f Corporations ,			
SUBJECT:	Ging Clich Name of Lin	Brothers Const nited Liability Company)	ruction LLC	
The enclosed Articl	es of Amendment and fee(s) are sub	omitted for filing.		
Please return all con	rrespondence concerning this matter	to the following:		
	Justin	P. Gingerich (Name of Person)		
	Gingerich B	Prothers Construction (Firm/Company)	ZECRE TARY TALLAHASSE	η
	16.852 NW	21 5 4 . (Address)	TARY IS	n = n フ
		n, FL 32424 (City/State and Zip Code)	MAY 13 P 2: 09 RETARY OF STATE AHASSEE. FLORIDA	ロ フ
For further information	tion concerning this matter, please c	eall:	-	
	Name of Person)	at () (Area Code & Daytime	Telephone Number)	
Enclosed is a check	for the following amount:			
☑ \$25.00 Filing Fe	ce \$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 enclosed	i)
M	IAILING ADDRESS:	STREET/COURIE	R ADDRESS:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gingerich	Brothers Construct	r records)	
(A Flo	bility Company as it now appears on ou rida Limited Liability Company)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
The Articles of Organization for this Limited Liabil Florida document number <u>L 080000354</u>	ity Company were filed on Apri	1 8, 2008 and assigned	
This amendment is submitted to amend the following	ng:		
A. If amending name, <u>enter the new name of the</u>	limited liability company here:	٠,	
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company," the	designation "Libb MAY 13 P 2: 09 LAHASSEE, FLORIDA	
B. If amending the registered agent and/or r registered agent and/or the new registered office		ords, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:	(Enter Florida street address)		
	, Florida		
-	(City)	(Zip Code)	
Non- Donistand A At- Clarators (California Donis	-4		

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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Joshua G. Gingerich	19937 NE CR 274 Altha, FL 32421	✓ Add ☐ Remove
 			Add Remove
	**************************************		Add Remove
		SECRETARY ALLAHASSE	Remove
·		E, FLORIDA	P Colove
			☐ Add ☐ Remove
D. If amendi	ng any other information, enter change((s) here: (Attach additional sheets, if necessa	ary.)
			
Dated	5 /12 /08 Signature of a member o	r authorized representative of a member	
_	, , , , , , , , , , , , , , , , , , ,	rstin D. Gingerich	

Page 2 of 2

Filing Fee: \$25.00