Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : CONTRACTORS REPORTING SERVICES, INC.

Account Number : I20050000099
Phone : (813)932-5244
Fax Number : (813)932-3782

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CONCRETE POLISHING & RESTORATION, LLC

2 NOV 21 AM 6: #2

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C. LEWIS

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EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

From: Roman Albano

Fax: +1 (813) 932-3782

To:

Fax: +1 (850) 617-6383

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COVER LETTER

TO:

Registration Section Division of Corporations

CONCRETE POLISHI	NG & RESTORATION, LLC	<u>: </u>
Name of Limi	ted Liability Company	
Amendment and fee(s) are sub	mitted for filing.	·
ondence concerning this matter	to the following:	
	ROMAN ALBANO	
	Name of Person	
CONTRACTOR	S REPORTING SERVICE,	INC
	Firm/Company	
137	95 N NEBRASKA AVE	
	Address	
	TAMBA RT. 33604	
	City/State and Zip Code	
F mail address //		
D-man address: (1	to be used for future annual report notinear	шон
oncerning this matter, please ca	all:	
MAN ALBANO	at (813) 93:	2-5244
f Person	Area Code & Daytime T	elephone Number
ne following amount:		
□\$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
	Name of Limi Amendment and fee(s) are substituted and fee(s) are substitut	CONTRACTORS REPORTING SERVICE, Firm/Company 13795 N NEBRASKA AVE Address TAMPA, FL 33624 City/State and Zip Code E-mail address: (to be used for future annual report notification oncerning this matter, please call: IAN ALBANO at (813) 93. Area Code & Daytime To the following amount: Is \$30.00 Filing Fee & Certified Copy

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 From: Roman Albano

Fax: +1 (813) 932-3782

Fax: +1 (850) 617-6383

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

To:

FILEO SECRETARY OF STATE DIVISION OF CORPORATIONS

2012 NOV 21 AM 9: 24

CONCRETE POLISHING & RES (Name of the Limited Liability Company as it n (A Florida Limited Liability C	FORATION, LLC ow appears on our records.)
(A Florida Limited Liability C	ompany)
The Articles of Organization for this Limited Liability Company were file	ed on 5/1/2008 and assigned
Florida document numberL08000043681	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability com	pany here:
CONCRETE PAINTING & RESTO	ORATION, LLC
The new name must be distinguishable and end with the words "Limited Liabil "L.L.C."	ity Company," the designation "LLC" or the abbreviation
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)	
B. If amending the registered agent and/or registered office add	ress on our records enter the name of the new
registered agent and/or the new registered office address here:	tess on our records, <u>enter the name of the new</u>
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 Changing Registered Agent, Signature of New Registered Agent

_	_		
Erom.	Roman	Albano	

Fax: +1 (813) 932-3782

To:

Fax: +1 (850) 817-6383

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GR = Manager GRM = Manag	ing Member		
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