L08000046228

(Requestor's Name)	_			
(Address)	_			
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status	_			
Special Instructions to Filing Officer:				
,				

Office Use Only



600136414716

10/02/08--01002--004 **25.00



B. KOHR

0CT - 2 2008

EXAMINER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Walk-In

Will Pick IIn

Authortic Concrete and	
Decorative Design, LC	
· · · · · · · · · · · · · · · · · · ·	E S T
	Art of Inc. File LTD Partnership File Foreign Corp. File
	L.C. File
	Fictitious Name File Trade/Service Mark
	Merger File
	Art. of Amend. File 2/C
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
	Driving Record
Requested by: 21 10/1 3136	UCC 1 or 3 File
Name Date Time	UCC 11 Search
	LICC 11 Retrieval

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

ARLAINS OF THE BOOK Authentic Concrete and Decorative Design, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on May 8, 2008 and assigned Florida document number L08000046228 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 "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 29200 Old Dixie Highway Enter new principal offices address, if applicable: Homestead, FL 33033 (Principal office address MUST BE A STREET ADDRESS) 29200 Old Dixie Highway Enter new mailing address, if applicable: Homestead, FL 33033 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: (Enter Florida street address)

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.

(City)

(If Changing Registered Agent, Signature of New Registered Agent)

(Zip Code)

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 = N	MGRM = Managing Member					
<u>Title</u>	<u>Name</u>	Address	Type of Action			
	·		Add Remove			
			Add Remove			
			Add Remove			
			Add Remove			
			Add Remove			
			Add Remove			
D. If amend	ding any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)				
			-			
Dated Septe	Daning -	or authorized representative of a premitter				
		Gonsalves, Jr. / MGRM				
	Typed	or printed name of signee	 -			

Page 2 of 2

Filing Fee: \$25.00