

LO8000050585

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

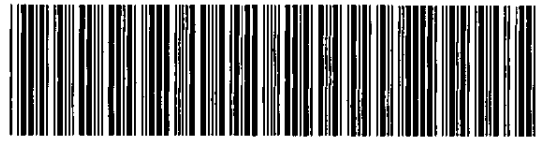
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800136930588

10/16/08--01018--011 **25.00

2008 OCT 16 AM 10:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

T. CLINE

OCT 17 2008

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CITADEL STUCCO PLUS, 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:

KEITH McCAULEY
(Name of Person)

CITADEL STUCCO PLUS, LLC.
(Firm/Company)

4375 S. ATLANTIC AVE #7
(Address)

NEW SMYRNA BCH., FL 32169
(City/State and Zip Code)

For further information concerning this matter, please call:

KEITH McCAULEY at 407, 468 0754
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the 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 Fee & Certificate of Status & Certified Copy (additional copy is enclosed)

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

FILED
 2008 OCT 16 AM 10:06
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

CITADEL STULLO PLUS, 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 5/19/08 and assigned Florida document number LO8000050585.

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."

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 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)

_____, 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)

FILED
2008 OCT 16 AM 10:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>VP</u>	<u>JERI ANN McCAULEY</u>	<u>4375 S. ATLANTIC AVE #7</u> <u>NEW SMYRNA BCH, FL 32169</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>VP</u>	<u>MICHAEL BAUMGART</u>	<u>606 CASA PARK COURT 0</u> <u>WINTER SPRINGS, FL 32708</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>TREASURER</u>	<u>MICHAEL STEPHENSON</u>	<u>476 WOOD ST.</u> <u>LAKE MARY, FL</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated 10 10 08, 2008

Robert K McCauley
Signature of a member or authorized representative of a member
ROBERT K. McCAULEY
Typed or printed name of signee

2008 OCT 16 AM 10:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**MINUTES OF THE MEETING
OF
CITADEL STUCCO PLUS, LLC.
(FEIN: 200403674)**

A meeting of members and managing members of the limited liability company listed above was held on October 6, 2008.

The following were present: Robert K. McCauley, Michael Baumgart, and Michael Stephenson, being a quorum and all of the members of the company.

Robert K. McCauley was elected chairman of the meeting and also appointed secretary thereof.

The following were duly nominated and a vote having been taken were unanimously elected officers of the company to serve for one year and until their successors are elected and shall qualify:

PRESIDENT/SECRETARY: Robert K. McCauley
VICE-PRESIDENT: Michael Baumgart
TRESURER: Michael Stephenson

There being no further business before the meeting, on motion duly made, seconded, and carried, the meeting adjourned.


Robert K. McCauley, PRES/SEC.

2008 OCT 16 AM 10: 06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED