Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850)617-6383

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

Fax Number : (323) 962-3889

AMND/RESTATE/CORRECT OR M/MG RESIGN

BMI PAINTING & WATERPROOFING,LLC

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COVER LETTER

Division of Co			
SIMIROT. BMI PA	INTING & WATERPRO	OFING.LLC	
SUBJECT:		nited Liability Company)	
The enclosed Articles of	f Amendment and fee(s) are sul	bmitted for filing.	
Please return all corresp	condence concerning this matter	r to the following:	
	Francyne Carrillo	(Name of Porson)	
		(vance of Latzon)	
	Legalzoom.com, Inc	(Firm/Company)	
	7083 Hollywood Blvd	d., Suite 180	
		(Address)	-
•	Los Angeles, CA 90		
		(City/State and Zip Code)	
For further information	concerning this matter, please of	call:	
Francyne Carrillo		at (323) 962-8600	
(Nam	e of Person)	(Area Code & Dayrime	(elophone Number)
Enclosed is a check for	the following amount:		
√ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regis Divis P.O. 1	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee. FL 32314	STREET/COURIER Registration Section Division of Corporati Clifton Building 2661 Executive Cente	ons

Tallahassec, FL 32301

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

BMI PAINTING & WATERPROOFI	ING,LLC	_	
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now a imited Liability Comp	ppears on our record any)	D
The Articles of Organization for this Limited Liability Co	ompany were filed or	06/12/2008	and assigned
Florida document number <u>L08000058010</u>	¹		,
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	Ited liability compan	v here:	
BMI Painting Enterprises, LLC The new name must be distinguishable and end with the word "L.L.C." B. If amending the registered agent and/or registered agent and/or the new registered office addressed agent and/or the new registered office addressed agent. Name of New Registered Agent:	erod office address		
New Registered Office Address:	<u>_</u>		
		(Enter Florida stre	et address)
		, Florid	la
	(City)		(Zip Code)
New Registered Agent's Signature, If changing Registered	d Agent:		

N

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 D ထု

MGR = Manager

. . . .

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:

	<u>Name</u>		Address		Type of Acti
					Add
					Remove
					-
					Add Remove
					
					Add Remove
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	ng any other informatio	n, enter change	(s) here: (Attach additiona	il sheets, if necessary.)
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