

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LICENSES ETC INC Account Number : T20070000159

Scootte vener

120070000139

Phone Fax Number

: (239)777-1028 : (877)275-3593

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

Email Address: jd Martin@ Simsonv.com

EC. FLOKID

HASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SIMS CONSTRUCTION SERVICES, LLC

Certificate of Status	1 1
Certified Copy	1
Page Count	03
Estimated Charge	\$60.00

K. SALY EXAMINER

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Corporate Filing Menu

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			COVERLETTER	(1)		
TO:	Registration S Division of Co					
SUBJE	CCT:		CTION SERVICES	LLC		
		Name of Lim	ited Liability Company			
The en	closed Articles o	f Amendment and fee(s) are sul	brnitted for filing.			
Please :	return all corresp	ondence concerning this matter	to the following:			
			Don Martin			
			Name of Person			
Sims Construction Services, LLC						
			Firm/Company	,		
1530 US Hwy 1						
			Address			
			Rockledge, FL 32955			
		14	City/State and Zip Code			
		E-mail address: (martin @ simsenv.com to be used for future annual report	notification)		
For fun	ther information	concerning this matter, please o	call;			
	1	Kristie Cook	at (239)	777-8321		
	Name	of Person	Area Code & D	aytime Telephone Number		
Bnolose	ed is a check for	the following amount:				
\$25 .	.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enc	Section 1 (20) \$60.00 Filing Fee. Certificate of State Certified Copy (additional copy is		

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

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SIMS CONSTRUCTION SERVICES (Name of the Limited Liability Company as it now appears on our records.

(A Florida Limited Liability Company) 6/30/2008 The Articles of Organization for this Limited Liability Company were filed on ____ L08000063668 Florida document number _ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Sims Construction & Remediation Services, LLC 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 malling 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

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.

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 = Managing Member

Title	Name	Address	Type of Action
MGRM	James P. Bowen	4525 Bonanza St Cocna, Fl. 32927	Add Remove
			Add Remove
**************************************			Add Remove
			Add Remove
			Add Remove
• 			Add Remove
D. If amendin	g any other information, enter change(i) here: (Attach odditional sheets, if necessary.)	 -
			- -
			<u>-</u>
Dated	May 25 , 2011	. Writing	
	<i>()</i> Jan	authorized representative of a member nes D. Martin printed name of signee	

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Filing Fee: \$25.00

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