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SECRETARY OF STATE
ALLAHASSEE.FLORIDA

T. CLINE

JUN 24 2009

EXAMINER

COVER LETTER

Division of Co	rporations				
SUBJECT:	R. Carter	Construction, LLC			
	Name of Lim	Name of Limited Liability Company			
The enclosed Articles of	f Amendment and fee(s) are su	bmitted for filing.			
Please return all corresp	ondence concerning this matte	to the following:			
		Rusty Carter Jr			
		Name of Person			
	R. 0	Carter Construction, LLC			
		Firm/Company			
	400.0	anno de la Deixa Cuita 000			
	400 0	400 Commodore Drive, Suite 202 Address			
	Fort I	auderdale, Florida 33325			
		City/State and Zip Code			
	F-mail address: (tycarterjr@hotmail.com to be used for future annual report notifice	otion)		
E 6 4 . 6 . 4		·	шоп)		
For further information of	concerning this matter, please of	caii;		2009 SEE	
Ru	ısty Carter Jr	at (_985) 285	5-5555 cell	ECRE	4
Name of Person		Area Code & Daytime	Telephone Number	2009 JUN 23 AM 10: 5 SECRETARY OF STATE ALLAHASSEE, FLORE	ELANCONION
				EE, P	
Enclosed is a check for t	he following amount:			M KO	-
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	
· MAIL	ING ADDRESS:	STREET/COURIE	R ADDRESS:		

TO:

Registration Section

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

(<u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now app Limited Liability Compan	pears on our records.	
The Articles of Organization for this Limited Liability (Florida document number	Company were filed on	November 4, 2008	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company	<u>here</u> :	
The new name must be distinguishable and end with the we "L.L.C."	ords "Limited Liability Cor	mpany," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	RESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			2009 JUN 23 AM SECRETARY OF
B. If amending the registered agent and/or registered agent and/or the new registered office add		n our records, <u>enter t</u>	- CO = 5
Name of New Registered Agent:	P-7		
New Registered Office Address:		Enter Florida street add	ress
<u> </u>		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registere	ed 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

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>	Address	Type of Acti	<u>on</u>
MGRM	Carmen Chacon	400 Commodore Drive Suite 202 Fort Lauderdale, Florida 33325	✓ Add Remove	
			Add Remove	
			Add Remove	
			Add Remove	
			Add	
			− Sk: IAdd	
D. If amend	ding any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	AM IO: 52	(
				
 Dated	June 18	2009///		
Daicd	,			
	Signature of a l	member of authorized representative of a member Rusty Carter Jr		
		Typed or printed name of signee		

Page 2 of 2

Filing Fee: \$25.00