L08000108142

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JIVISION OF CORPORATION

10 MAR 22 AM 8: 16

B. KOHR
MAR 24 2010

EXAMINER

COVER LETTER.

	f Corporations		
SUBJECT:		an Moore, L.L.C. nited Liability Company	
The enclosed Articl	es of Amendment and fec(s) are so	ubmitted for filing.	5
Please return all correspondence concerning this matte		er to the following:	10 MAR 22
		Jason C. Moore	~,~
		Name of Person	
		Bowman Moore, L.L.C.	
•		Firm/Company	
		523 Rhode Island Ave	
		Address	
		Norfolk, VA 23508	
		City/State and Zip Code	
	jason.ı E-mail address:	moore@bowmanmoore.com (to be used for future annual report notification	1)
For further informat	ion concerning this matter, please	call:	
	Jason Moore	at (937) 623	-7560
N	ame of Person	Area Code & Daytime Tele	phone Number
Enclosed is a check	for the following amount:		
\$25.00 Filing Fe	e \$\sum \\$30.00 \text{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 A Registration Section Division of Corporations Clifton Building 2661 Executive Center O Tallahassee, FL 32301	S

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Bowman Moore, L.L.C.

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

11/20/2008 The Articles of Organization for this Limited Liability Company were filed on _____ and assigned Florida document number _____L08000108142 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Bowman Moore, 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 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 City

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

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager
MGRM = Managing Member

<u>Title</u> <u>Name</u>

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Keith H. Bowman	4250 Sweet Potato Ridge Road	Add
		4250 Sweet Potato Ridge Road Englewood, OH 45322	Remove
			☐ Add
			Remove
			☐ Add
			Remove
			Add Remove
			Remove
			Add Remove
			Remove
D. If amend	ling any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	
<u> </u>			_
			_
			_
Dated	March 12th .	2010	
		am C. Mean	
	\mathcal{O}	nember or authorized representative of a member Jason C. Moore	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00