(Requestor's Name)						
(Ad	ldress)					
(Ad	ldress)					
(Cit	ty/State/Zip/Phon	e #)				
PICK-UP	☐ WAIT	MAIL .				
(Business Entity Name)						
(Do	ocument Number)				
Certified Copies	_ Certificate	Certificates of Status				
Special Instructions to Filing Officer:						
A. LUNT						
MAY 30 2011						
EXAMINER						

Office Use Only



900235563449

05/29/12--01034--001 **25.00

COVER LETTER

Division of Co	rporations					
SUBJECT:	ED BRUNET C	ONSTRUCTION, LLC				
SUBJECT:		Name of Limited Liability Company				
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.				
Please return all corresp	ondence concerning this matter	to the following:				
				Pg.	SA DE	
		Lawrence E. Brunet		32-25		÷~i
		Name of Person	"	HAS	MAY 2	7
	ED BRU	NET CONSTRUCTION, LI	_C	86 60	(29	eca Î
	**************************************	Firm/Company		FE 51		,
	19834 Vaughn Rd.		TAIT,	 (#)		
		Address		,•		
		Seminole, AL 36574				
		City/State and Zip Code				
	E-mail address: (runetL@hotmail.com to be used for future annual report noti	fication)			
For further information	concerning this matter, please of	·	,			
	Ed Brunet	at (850)	292-3373			
Name	of Person		ne Telephone Number			
Enclosed is a check for	the following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed	\$60.00 Fili Certifica d) Certified (addition	te of Stat Copy		sed)
	LING ADDRESS: tration Section	STREET/COURIER ADDRESS: Registration Section				

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

TO:

Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ED BRUNET CON	STRUCTION	, LLC		
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appea Liability Company)	rs on our records.)	•	
The Articles of Organization for this Limited Liability Compan	y were filed on	01/05/2009	and assigned	
Florida document numberL0900000694				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lia	bility company he	<u>re</u> :		
The new name must be distinguishable and end with the words "Lin"L.L.C."	nited Liability Comp	any," the designation "I	LC" or the abbreviation	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)			Es. B	
			> 2 Th	
		Š	1 N	
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
		3		
		7	(a)	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he		our records, <u>enter t</u>	he name of the new	
The second secon	<u> </u>			
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

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 Type of Action **Title** Name **Address** MGRM Caleb Martin ☑ Add ☐ Remove 9835 Route 89 North East PA 16428 Lawrence E. Brunet MGRM 19834 Vaughn Rd ☐ Add Seminole, Al. 36574 Remove ☐ Add Remove ☐ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 5/24/2012 Dated_ Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00