

Office Use Only

## G. MCLEOD

APR 1.7 2009

**EXAMINER** 



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04/16/09--01042--013 \*\*25.00

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SECRETARY S.F. STATE DIVISION OF CURRIC SATION

## **COVER LETTER**

TO: Registration Sec Division of Corp		
SUBJECT: Florida (	Construction Resources, LLC	8
SUBJECT. THE SUBJECT.	(Name of Limited Liability Company)	M
The enclosed Articles of A	Amendment and fee(s) are submitted for filing.	
Please return all correspon	. •	
•		
	Mark Curtiss	, _
	(Name of Person)	
	Florida Construction Resources, LLC	_
	(Firm/Company)	
	1700 S. MacDill Avenue, Suite 240	_
	(Address)	
	Tampa, Florida 33629	_
	(City/State and Zip Code)	
For further information co	oncerning this matter, please call:	
Mark Curtiss	at ( 813 ) 503-8557	
(Name o	of Person) (Area Code & Daytime Telephone Numb	per)
Enclosed is a check for th		
☑ \$25.00 Filing Fee	(additional copy is enclosed) Certific	ate of Status & ad Copy is enclosed)
Registra Division P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314 Tallahassee, FL 32301  STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	•

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Florida Construction Resources, LLC	,			
( <u>Name of the Limited Liabili</u> (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	<del>.</del>		
The Articles of Organization for this Limited Liability	Company were filed on January 7, 2009	and assigned		
Florida document number L0900001828				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the li	mited liability company here:			
The new name must be distinguishable and end with the w	ords "Limited Liability Company" the designation	n "LLC" or the abbreviation		
L.L.C."	Emilied Eddining Company, the designation			
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADI	ORESS)	SE (//S		
		<b>1 PR</b> (2 Kg)		
		16 PR		
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
Maning undress MAT BE A FOST OFFICE BOA	-	<b>万</b> 公司 <b>2</b> 名語		
		<u> </u>		
B. If amending the registered agent and/or reg	istered office address on our records ent	or the name of the new		
registered agent and/or the new registered office ad		the name of the new		
•				
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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Aran Development, Inc		Add Remove
MGRM_	Michael S. Dickinson	1212 Suffolk Drive Tampa, Florida 33629	<b>♣</b> Add <b>♣</b> Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendi	ng any other information, ente	er change(s) here: (Attach additional sheets, if necessary.)	_
		· · · · · · · · · · · · · · · · · · ·	
Dated April 14	•	2009	<del>-</del> -
Dated reptil 1-		a member of authorized representative of a member	
-	Mark P. Curtiss	Typed or printed name of signee	

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Filing Fee: \$25.00