

L09000002376

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

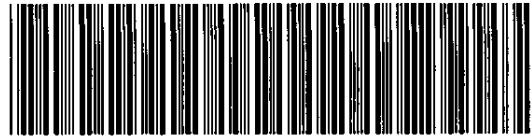
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TALLAHASSEE, FLORIDA

10 JAN - 8 AM 8:01

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TALLAHASSEE, FLORIDA

10 JAN - 8 AM 8:08

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N. O'Brien JAN - 8 2010

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CERTIFIED BUILDING & REMODELING LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Richard Carl Ecksrom

Name of Person

CERTIFIED BUILDING & REMODELING LLC

Firm/Company

320 Robin Hood Circle #201

Address

Naples, FL 34104

City/State and Zip Code

rceckstrom@comcast.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Richard Carl Ecksrom

Name of Person

at (**239**)

269-0190

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 ADDRESS:

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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

10 JAN -8 AM 8:08

CERTIFIED BUILDING & REMODELING LLC

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

CLERK OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on January 08, 2009 and assigned
Florida document number L09000002376.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Renovators of Naples 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)

320 Robin Hood Circle #201
Naples, FL 34104

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

320 Robin Hood Circle #201
Naples, FL 34104

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 _____

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>	<u>Address</u>	<u>Type of Action</u>
MGRM	Michael Keyes	1325 7th Street South 3C Naples, Florida 34102	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	James A Marks	12643 Biscayne Street Naples, Florida 34105	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

FILED
 10 JAN - 8 AM 8:08
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Dated 1/1, 2010.

Richard Carl Eckstrom
Signature of a member or authorized representative of a member

Richard Carl Eckstrom
Typed or printed name of signee