## L09000013114

## David R. Johnson, CPA 1265 Hwy 331 S. DeFuniak Springs, FL 32435 Ph: (850)-892-2752 Fax: (850) 892-9299 (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies \_\_\_\_\_ Certificates of Status Special Instructions to Filing Officer:

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EXAM

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KARQ; Constructi	on LLC	<u></u>	
(Name of the Ismited Liability Comp (A Florida Limited	<u>pany as it now appear</u> I Liability Company)	rs on our records	<u>s.</u> )
The Articles of Organization for this Limited Liability Compar Florida document number <u>L090000 13/14</u> .	ny were filed on	2-9-09	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ıbility company her	<u>te</u> :	
The new name must be distinguishable and end with the words "Lin".L.C."	mited Liability Compa	iny," the designat	ion "LLC" or the abbreviation
Enter new principal offices address, if applicable:			SEE SEE
(Principal office address MUST BE A STREET ADDRESS)			AR E
Enter new mailing address, if applicable:			ARK OF ST
(Mailing address MAY BE A POST OFFICE BOX)			#ATE
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he Name of New Registered Agent:		our records, <u>en</u>	ter the name of the new
New Registered Office Address:			
new Registered Office Address.	En	ter Florida stree	t address
		, Florid	a
	City		Zip Code

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.

New Registered Agent's Signature, if changing Registered Agent:

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 Title **Type of Action Name Address** James Richard Long MGRM Remove ☐ Remove Remove Add Add Remove Remove <del>Remove</del>  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member

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Typed or printed name of signee

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