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D. BRUCE
JUL 0 2 2010
EXAMINER

## **COVER LETTER**

TO:

Registration Section

, Division of Corp	ocrations		
SUBJECT:	Garvi	e & Co., LLC	
		ited Liability Company	
The enclosed Articles of A	amendment and fee(s) are su	bmitted for filing.	
Please return all correspor	dence concerning this matte	r to the following:	
		Joseph P. Garvie	
		Name of Person	
		Garvie & Co., LLC	
		Firm/Company	
315 Shell Avenue SE			
		Address	
	Fort	Walton Beach, FL 32548	
		City/State and Zip Code	ال (
	joegarvie	e@garviecontracting-glc.com to be used for future annual report notification	m)
For further information co	ncerning this matter, please of	•	
		an.	PH 2:
JOSEPH T.	GARVIE	at (850) 243-555	54 <u>97</u> 3
Name of	Person	Area Code & Daytime Tel	ephone Number
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fec & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Registrat Division P.O. Box	NG ADDRESS: ion Section of Corporations (6327 see, FL 32314	STREET/COURIER A Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Garv	ie & Co., LLC		
( <u>Name of the Limited Liability</u> (A Florida Li	Company as it now appe imited Liability Company)	ars on our records.)	
The Articles of Organization for this Limited Liability Co	ompany were filed on	March 02, 2009	and assigned
Florida document numberL0900020403			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ed liability company he	ere:	
The new name must be distinguishable and end with the word "L.L.C."	ls "Limited Liability Comp	pany," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRI	ESS)		0
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7 C 2 2 A	L-1 PH 2: 36
B. If amending the registered agent and/or registe registered agent and/or the new registered office address.		our records, enter the	e name of the new
Name of New Registered Agent:			
New Registered Office Address:		nter Florida street addre	ess —
		, Florida	
<del></del>	City <sup>,</sup>	, i loi iua	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 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>	Address	Type of Action			
MGRM	Andrew A. Garvie, II	4500 Guinea Station Road Fredericksburg, VA 22408	Add Remove			
			Add Remove			
			Add Remove			
<del></del>			Add Remove			
			Add Remove			
			Add Remove			
D. If amendin	g any other information, enter change(	s) here: (Attach additional sheets, if necessary.)				
			F11 F			
Dated	July 1 , 2010	P Auron	D D			
	Signature of a member of	authorized representative of a member	<del></del>			
Joseph P. Garvie  Typed or printed name of signee						

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Filing Fee: \$25.00