LD9000011391

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(Document Number)
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L. SELLERS

JUL; - 8 2009

EXAMINER

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SECRETARY OF STATE

COVER LETTER

TO:	Registration Division of C	Section Corporations			
SUBJI	· FCT·	Talon C	ontracting, LLC		
50.00			ted Liability Company		
The en	closed Articles	of Amendment and fee(s) are sub	omitted for filing.		
Please	return all corre	spondence concerning this matter	to the following:		
			Ricardo Valle		
			Name of Person		
		T.	alon Contracting, LLC		
		3	307 S. Willow Aveune	ne	
			Address		
		City/State and Zip Code			
	ricardo@taloncontracting.org E-mail address: (to be used for future annual report notification)				
For fu	rther informatio	on concerning this matter, please of	call:		
		Ricardo Valle	at (_813)	451-9092	
Name of Person		Area Code & Da	ytime Telephone Number		
Enclos	sed is a check fo	or the following amount:			
/ \$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclo	Seed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enc	
	MA	JILING ADDRESS:	STREET/CO	URIER ADDRESS:	

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

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



June 25, 2009

RICARDO VALLE 307 S. WILLOW AVENUE TAMPA, FL 33606-2157

SUBJECT: TALON CONTRACTING, LLC

Ref. Number: L09000021139

We have received your document for TALON CONTRACTING, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Letter Number: 509A00021780

Leslie Sellers Regulatory Specialist II

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tal (<u>Name of the Limited Lia</u> (A Flo	on Contracting, LLC. bility Company as it now apper brida Limited Liability Company)	ars on our records.)		
The Articles of Organization for this Limited Liabil Florida document number	· · · ·	03/04/2009	and assigned	
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	e limited liability company ho	ere:		
The new name must be distinguishable and end with th "L.L.C."	e words "Limited Liability Com	pany," the designation "	LLC" or the abbreviati	on
Enter new principal offices address, if applicable	e:		,	-
(Principal office address MUST BE A STREET A	DDRESS)			-
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>			-
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter	the name of the ne	<u>e</u> w
Name of New Registered Agent:			09 . SEC	_
New Registered Office Address:			Region F T	-
	E	Enter Florida street add	akess 7	
-	City	, Florida	Zip Code	-
New Registered Agent's Signature, if changing Regi	istered Agent:		TZip Code D	

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, 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>	Type of Action
MGR	MICHAEL SCIONTI	4221 N. HIMES SUITE 102 TAMPA, FL 33607	✓ Add ☐ Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
	· · · · · · · · · · · · · · · · · · ·		Add Remove
D. If amend	ling any other information, e	nter change(s) here: (Attach additional sheets, if necessary	····
_			FILI 09 JUL -7 SECKE TAKY ALLAHA\$SE
Dated	Signature	Multiple of a member or authorized representative of a member	PH 2: 15 OF STATE FLORIDA
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00