## L09000023864

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SECRETARY OF STATE
ALLAHASSEE, FLORING

J. BRYAN

APR 2 8 2009

**EXAMINER** 

## **COVER LETTER**

TO:

**Registration Section** 

Division of C	Corporations		
OLD FROM	New Wave Munici	pal Building Services,LLC	
SUBJECT:		ited Liability Company	<del></del>
	*		
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corre	spondence concerning this matte	r to the following:	
		Wayne A. Vater	
		Name of Person	
	New Wave	Municipal Building Services, LLC	
		rim/Company	
		3410 SW 26th Street	
		Address	- 26 6 - 2 2 T
		Ocala, Florida 34474	APR 27 PM 3: 55 LARIASSEE, FLORIG
	·	City/State and Zip Code	
		rater@embarqmail.com (to be used for future annual report notification)	
F 6		•	3: 5 STA
ror turiner informatio	n concerning this matter, please	caii:	DE S
	Wayne Vater	at ( 352 ) 229-5588	
Name of Person		Area Code & Daytime Telephone Nu	mber
Enclosed is a check fo	r the following amount:		
\$25,00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy Cert (additional copy is enclosed) Cert	D Filing Fee, ificate of Status & ified Copy itional copy is enclosed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET/COURIER ADDRES Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	S:

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

New Wave Municipal Building Services, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) April 26th, 2010 The Articles of Organization for this Limited Liability Company were filed on L09000023864 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: New Wave Building Services, 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 City

## 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:

	Manager I = Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			, , , , , , , , , , , , , , , , , , ,
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D. If a	nending any other information, enter chang	e(s) here: (Attach additional sheets, if necessar)	<i>).)</i>
	Want to revise articles of organization	n to include Building Construction and	
	Contracting services through License	ed Qualifiers and Construction Consulti	ng
	services.		
			·6
			Fig 8
	A:1 00th 00	40	F II 10 APR 2: SECULETAR SECULETAR
Dated _	April 26th , 20	10	ARY SSE
	Way	avat :	M E P
		or authorized representative of a member	3: 55 STATE
		Vayne A. Vater are printed name of signee	55

Page 2 of 2

Filing Fee: \$25.00