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D. BRUCE

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**EXAMINER** 

## **COVER LETTER**

Division of corpe	71 4410113							
SUBJECT: NA	PLES CONTRACTING & REMODELING,LLC.							
Name of Limited Liability Company								
The enclosed Articles of Articles	mendment and fee(s) are submitted for filing.							
Please return all correspond	dence concerning this matter to the following:							
	GEORGE MOUNTRAKIS							
	Name of Person							
	NAPLES CONTRACTING & REMODELING, LLC.							
	Firm/Company							
	1620 Desoto Blvd. N.							
	Address							
		<b>26</b>	خبیت «خبیت					
	Naples, FL 341200	Sec.	91 330	-11				
	ブラ	3						
		ASS ABY	δ					
	E-mail address: (to be used for future annual report notification)							
For further information con	cerning this matter, please call:	<u>-</u> ~	ÿ					
TO TURBLE MIOIMATION CON	cerning this matter, prease can.	STATE	10					
George	e Mountrakis at ( 239 ) 465-3008	250	ம					
Name of P	at (	<del></del>						
Enclosed is a check for the	following amount:							
	\$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Fil	ina Fee						
Tazaron tunis tee	Poporor Litting 1 cc gc and Litting 1 cc gc appropriate	mg rec,						

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(additional copy is enclosed)

MAILING ADDRESS:

Certificate of Status

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Certificate of Status &

(additional copy is enclosed)

Certified Copy

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limite	d Liability Compa		n our records)	
(Name of the Limite)	A Florida Limited	iny as it now appears o Liability Company)	n our records.)	
The Articles of Organization for this Limited I Florida document number L0900004		were filed on Dec	ember 13, 2011 and assigned	
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liab	oility company here:		
The new name must be distinguishable and end w "L.L.C."	ith the words "Lim	ited Liability Company,	" the designation "LLC" or the abbreviation	
Enter new principal offices address, if appli	cable:		, **	
(Principal office address MUST BE A STREET ADDRESS)		N/A		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	AHASSER, F	
1774 min 135 7271 2271 2 001 0 1 1 202	<u> </u>		2: 29 1078 D	
B. If amending the registered agent and registered agent and/or the new registered of				
Name of New Registered Agent:	N/A			
New Registered Office Address:			Florida street address	
		City	, Florida Zip Code	
		City	Zīp Code	

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

J.

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>Address</u> Type of Action Title. Name KRISTO MISKA **MCRM** 495 Ibis Way ☐ Add Naples, FL 34110 🔀 Remove **BESNIK MISKA** MCRM 855 Palmview Dr. Remove Naples, FL 34110 ☐ Add Remove Add Remove  $\prod Add$ Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) December 13, 2011 Dated Signature of a member or authorized representative of a member George Mountrakis Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00