## 109000043694

(Re	questor's Name)	
(Ad	dress)	<del></del> -
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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SECRETARY OF STATE

BL VORISER NOV 19 2018

## **COVER LETTER**

Division of Co			•
RICKY CI SUBJECT:	LINTON CONSTRUCTION LL	.C	
	Name of Limi	ited Liability Company	
	Amendment and fee(s) are sub-	Č	
	BRENDA CHAMBERS		
	CHAMBERS & ASSOCIA	Name of Person TES	
	603 N. FERDON BLVD.	Firm/Company	
	CRESTVIEW, FL 32536	Address	
	BRENDA@CA-CRESTVIE		
For further information of	E-mail address: (to oncerning this matter, please cal	o be used for future annual report notificall:	ration)
BRENDA CHAMBERS		850 398-8088 at ()	
Name of	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for th	ne following amount:		
S S25.00 Filing Fcc	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclused)

MAILING ADDRESS:

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

## STREET/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

RICKY CLINTON CONSTRUCTION, LLC	HÉ VO
(Name of the Limited Liability Compar (A Florida Limited L	iy as it now appears on our records.)
· · · · · · · · · · · · · · · · · · ·	nability Company)
The Articles of Organization for this Limited Liability Company	were filed on 05/05/2009
Florida document number L09000043694	Pr 2
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ity company here:
The new name must be distinguishable and contain the words "Limited Liabilit	y 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)	
D 16	
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here:	ce 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 Florido street address

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 605, 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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MBR	DAVID S FLEMING	6016 FLAMINGO ROAD	_
		CRESTVIEW, FL 32539	
			■ Remove
MBR	ROBERT H BRYANT	6016 FLAMINGO ROAD	•
		CRESTVIEW, FL 32539	
			□ Remove
		<del></del>	□ Change
			Add
			□ Remove
			□ Change
	<del></del>		
			□ Remove
		Change	
		<del></del>	☐ Remove
			Change
	<del></del>		□ Add
			□ Remove
			□ Change

Note:	ive date, if other than the date of filing:
	ford specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	OCTOBER 30 2018

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Typed or printed name of signee

Filing Fee: \$25.00