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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

Division of Co				
Concrete b	y Charles, LLC			
SUBJECT:	Name of Lim	ited Liability Company		
	Amendment and fee(s) are sub	_		
	Brenda Chambers	-		
		Name of Person		
	Total Business Solutions-I	Bookkeeping Division		
		Firm/Company		
	603 N. Ferdon Blvd.			
		Address		
	Crestview, FL 32536			
	brenda@tbscrestview.com	City/State and Zip Code		HAY I
		to be used for future annual report notif	ication)	any o
For further information of	concerning this matter, please ca	all:		OF STA
Brenda Chambers		850 423-1099		FATE NOTE OF THE PARTY OF THE P
Name o	of Person	at () Area Code Daytime	Telephone Number	
Enclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55 00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (e of Status &

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 TO ARTICLES OF ORGANIZATION OF

Concrete by Charels, LLC		
(<u>Name of the Limited Liabili</u> (A Florida	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C	Company were filed on 06/22/2009	and assigned
Florida document number 1.09000060357	 ·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	:
The new name must be distinguishable and contain the words "Line	nited Liability Company." the designation "LLC" o	r the abbreviation "LEC."
Enter new principal offices address, if applicable:		全部支
(Principal office address MUST BE A STREET ADDI	RESS)	SE G
		and assigned and assigned and assigned and assigned
		응길 다 내내
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add		enter the name of the new
Name of New Registered Agent:	WHITE THE TAXABLE PARTY OF T	
New Registered Office Address:		
	Enter Florida street address	
	, Flori	da
	·	Zıp Code
New Registered Agent's Signature, if changing Registered I have by accept the appointment as registered agent		new gayaa to comply with the

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.

If Changing Registered Agent, Signature of New Registered Agent

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
MGR	Charlie M. Williams	2971 Aplin Road	■ Add
		Crestview, FL 32539	□ Remove
		· · · · · · · · · · · · · · · · · · ·	☐ Change
			□ Add
			☐ Remove
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			ASSEE OF FE
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Signature of a member or authorized representative of a member	7/ /	
Signature of a member or authorized representative of a member	1 Ola North	
Marina Harak	Signature of a member or authorized representative of a member	
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A THE AVENUE AT THE STATE OF TH	Charles Harax	

Page 3 of 3

Filing Fee: \$25.00