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EXAMINER

COVER LETTER

SUBJECT:	First Florid	la Services LLC		
30 Ba LC 7	Name of Limite	ed Liability Company		
- The enclosed Articles o	f Amendment and fee(s) are subn	nitted for filing.		
Please return all corresp	ondence concerning this matter t	o the following:		5
		Timothy Greener		o Jul 27
		Name of Person		27 6
and the second s	First	Florida Services, LL0)	NI.
		Firm/Company		
	1097 J	upiter Park Lane, Suit	te 7	ັພ
	· ·	Address		
	Ju	ipiter, Florida, 33458		
		City/State and Zip Code		
	tgre	ener@calclosets.com		
	E-mail address: (to	be used for future annual repor	rt notification)	
For further information	concerning this matter, please ca	dl:		
Tin	nothy Greener	at (561)	252-0102	
Name of Person		Area Code & D	Daytime Telephone Number	***************************************
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	closed) Certified C	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

First Florida S (Name of the Limited Liability Compa (A Florida Limited L	ervices, LLC ny as it now appears on our records.) liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number	were filed on April 19, 2009 and ssigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
he new name must be distinguishable and end with the words "Limi L.L.C."	ted Liability Company," the designation "LLC" or the abbreviatio		
Enter new principal offices address, if applicable:	1097 Jupiter Park Lane, Suite 7		
Principal office address MUST BE A STREET ADDRESS)	Jupiter, Florida, 33458		
Enter new mailing address, if applicable:	1097 Jupiter Park Lane, Suite 7		
Mailing address MAY BE A POST OFFICE BOX)	Jupiter, Florida, 33458		
B. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here	fice address on our records, enter the name of the nev		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Florida		
	City Zip Code		

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 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 Title Name **Address Type of Action** MGRM⁻ John Tague 1097 Jupiter Park Lane, Suite 7 **⊘** Add Jupiter, Florida, 33458 Remove Add Remove □ Add Remove Add Remove □Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member of authorized representative of a member **Timothy Greener** Typed or printed name of signee

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Filing Fee: \$25.00