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CHARTARY OF STATE
ALLAHASSERS FLARIOS

D. BRUCE

JAN 3 1 2012

**EXAMINER** 

#### **COVER LETTER**

TO: Registration Section
Division of Corporations

### SUBJECT: STEPHEN BOLAND SCREENING, REPAIR, AND MAINTEN AMCE SERVICES LLC

Name of Limited Liability Company

The enclosed Articles o	f Amendment and fee(s) are sul	ubmitted for filing.	
Please return all corresp	ondence concerning this matter	er to the following:	
		STEPHEN BOLAND	
		Name of Person	
	STEPHEN BOLANI	ID SCREENING, REPAIR, AND MAINTE NAMCE SERVICES I	LLC
	<del>****</del>	Firm/Company	
	2	2542 TRIBBLE DRIVE	
		Address	
	PORT (	ORANGE, FLORIDA, 32128	
		City/State and Zip Code	
	ARGO	FLORIDA@HOTMAIL.COM	
		to be used for fitting angular most matter to a	<b>-</b> 45
For further information	concerning this matter, please o	call:	[ _
***************************************	PHEN BOLAND	at (386) 760-8630 🛱 🚾 🟋 🗍	7
Name	of Person	Area Code & Daytime Telephone Number	3
		En constant	
Enclosed is a check for	the following amount:	æm of	
\$25.00 Filing Fee	✓\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)  (additional copy is enclosed)	

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

## STEPHEN BOLAND SCREENING, REPAIR, AND MAINTENAMCE SERVICES LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Con	npany were filed on De	CEMBER 31, 2009 and assigned
Florida document numberL09000072267		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company her	<b>r</b> : .
STEPHEN BOLAND S	CREENING FOR L	ESS LLC
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Compa	ny," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		And the second s
(Principal office address MUST BE A STREET ADDRE	<u>(SS)</u>	Carry, Carryon
		- Archive
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		5 <u>2</u> 2 U
		ਰੂਜ ਨ
B. If amending the registered agent and/or register registered agent and/or the new registered office address  Name of New Registered Agent:  New Registered Office Address:	ed office address on o	our records, enter the name of the new
TAIL MAINING AN ACTAM I SHAIRING	En	er Florida street address
		Florida
<del></del>	City	Zip Code
New Registered Agent's Signature, if changing Registered A	gent;	
I hereby accept the appointment as registered agent and the provisions of all statutes relative to the proper and a accept the obligations of my position as registered agen being filed to merely reflect a change in the registered to company has been notified in writing of this change.	complete performance nt as provided for in Ch	of my dutics, and I am familiar with and apter 608, F.S. Or, if this document is
Ĩ	I Changing Registered Age	nt, Signature of New Registered Agent

Page 1 of 2

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 = Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
<del></del>	<del></del>		Add Remove
			Add Remove
			Add Remove
D. If an	nending any other information, enter char	nge(s) here: (Attach additional sheets, if necessary.	<i>)</i>
			12 JAN 30 16 VAL 21
Dated	January 29th 2	o12.	FINANCE OF STATE
	Signature of a memb	per or authorized representative of a member	
		TEPHEN BOLAND ed or printed name of signee	·

Page 2 of 2

Filing Fee: \$25.00