## L09000077291

/Dan				
(Req	uestor's Name)			
(Add	ress)			
(Addi	ress)			
(City/	State/Zip/Phon	e#) ',		
PICK-UP	WAIT	MAIL		
(Busi	ness Entity Nar	ne)		
(Doc	(Document Number)			
Certified Copies	Certified Copies Certificates of Status			
Special Instructions to Fi	ling Officer:			
]				
·				

Office Use Only



900159333529

08/26/09--01015--003 \*\*25.00

FILED

99 AUG 26 AM II: 17
SECRETARY OF STATE
ALL AHASSEE, FLORIGE

J. BRYAN

AUG 27 2009

EXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: J NUNNY GENERAL CONTRACTING LLC Name of Limited Liability Company	•
The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:	
JAMES R. NUNNAMAKER	<u></u>
J NUNNY GENERAL CONTRACTO	
22950 PRIVATEER DRIVE	SECRETALLAH
CUDJOE KEY FL 330  City/State and Zip Code  JNUNNY @ COMCAST, NE  E-mail address: (to be used for future annual report notification)	O9 AUG 26 AM II: 17 SECRETARY OF STATE TALLLAHASSEE. FLORIDA
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:	STATE STATE PLORIDA
TAMES R. NUNNAMAKER at (603) 343-333  Name of Person Area Code & Daytime Telep	32 Ohone Number
Enclosed is a check for the following amount:  \$25.00 Filing Fee & \$30.00 Filing Fee & Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: STREET/COURIER AI Registration Section Registration Section Division of Cornerations Division of Cornerations	

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

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NWNNY GENERAC  (Name of the Limited Liability Company (A Florida Limited Liability Company)	CON TRACTING  vas it now appears on our re  ubility Company)	cords.)
The Articles of Organization for this Limited Liability Company we Florida document number <u>L0900077291</u> .	vere filed on <u>AUGUST</u>	11, 200 <b>9</b> and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	ity company here: N/A	
The new name must be distinguishable and end with the words "Limite "L L.C."		signation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		As o
(Principal office address MUST BE A STREET ADDRESS)		ECH S FI
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	E PILIT
B. If amending the registered agent and/or registered offic registered agent and/or the new registered office address here:		is, enter the name of the new
Name of New Registered Agent:	NA	
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 the provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	te performance of my dution covided for in Chapter 608,	es, and I am familiar with and , F.S. Or, if this document is

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>Title</u>	Name	Address	Type of Action
MGR	JAMES R. NUNNAMAKER	22950 PRIVATEER DRIVE CUDJOG KEY, FL 33042	Add Remove
			Add Remove
D. If amendin	ng any other information, enter change(s	s) here: (Attach additional sheets, if necessary.)	_
		ALLAHASSEE.	FILE 09 AUG 26 AM
Dated	JUGUST 14 , 200		di: 17
_	DENNIS Richi	r authorized representative of a member  ALLS  printed name of signee	

Page 2 of 2

Filing Fee: \$25.00