## L09000104244

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SECRETARY OF STATE
SECR

J. BRYAN

OCT. 24 2012

**EXAMINER** 



October 19, 2012

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



To Whom It May Concern:

Enclosed is our signed copy to amend the Articles of Organization of a Florida Limited Liability Company.

Please make the changes noted.

If you should have any questions or concerns, feel free to contact me.

Thank you,

German Buitrago Cell: /352-613-2454

## **COVER LETTER**

TO:

TO:	Registration S Division of Co				
SUBJE	·CT•	BIG SPAN S	STRUCTURES LLC		
SOBOL			ted Liability Company		
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please	return all corresp	ondence concerning this matter	to the following:		1. E
			German Buitrago		TALLAHASSEE, FLURIO
		Ri	g Span Structures Llc.		OT 23 AM
			Firm/Company		FLUR FLUR
		29	912 North Florida Ave	·	DM -
		1	Hernando, FL 34442		
			City/State and Zip Code		_
		gbu E-mail address: (	uitrago@bigspans.com to be used for future annual report no	otification)	
For fur	ther information	concerning this matter, please of	call:		
		rman Buitrago	at ( <u>352</u> ) Area Code & Day	419-4890 time Telephone Numb	<del></del> er
Enclos	ed is a check for	the following amount:			
<b>V</b> \$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certific sed) Certific	iling Fee, ate of Status & ed Copy onal copy is enclosed)
	Regisi Divisi P.O. E	LING ADDRESS: tration Section on of Corporations Box 6327 tassee, FL 32314	STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations 3 Center Circle	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Big Span Str	uctures Llc.		
(Name of the Limite	d Liability Compa A Florida Limited	ny as it now appear Liability Company)	s on our records.	
The Articles of Organization for this Limited Liability Company were filed on			10/28/09	and assigned
Florida document number L0900010				
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name	of the limited liab	oility company her	<u>e</u> :	
	N/A	<b>A</b>		
The new name must be distinguishable and end w "L.L.C."	ith the words "Lim	ited Liability Compa	my," the designation "L	LC" or the abbreviation
Enter new principal offices address, if appli	cable:	N/A		·
(Principal office address MUST BE A STRE	ET ADDRESS)	N/A	TAS	2012
		N/A	L C	<u> </u>
Enter new mailing address, if applicable:		N/A	HASSET	T 23 PM
(Mailing address MAY BE A POST OFFICE BOX)		N/A	-n	67 =
		N/A		三 2
			7	200
B. If amending the registered agent and			our records, <u>enter t</u>	he name of the new
registered agent and/or the new registered	ornce address nei	<u>re</u> :		
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A	·		
		Enter Florida street address		
		N/A	, Florida	N/A
		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

<u> Title</u>	Name	<u>Address</u>	Type of Action
MGRM	Richard W Laxton Jr.	1293 North Castleland Terrace Lecanto, Florida 34461	Add Remove
			Add Remove
			Add Remove
			Add Remove
			AddRemove
			Add Remove
D. If amen	ding any other information, enter ch	nange(s) here: (Attach additional sheets, if necessar	ry.)
<u>CI</u>	nange address of MGRM Germ	nan Buitrago	
	909 North Osprey Cove Pt. ecanto, FL 34461	TALL ZH	201200
		ASSEE, F	FILE
Dated	October 19th ,	2012 ORION A	ED #II:21
	Signature of a me	mber of authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00