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J. BRYAN

SEP - 5 2012

EXAMINER

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	Gulfstream Cons	struction Services, LLC	
	Name of Limi	ted Liability Company	
The enclosed Articles o	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	condence concerning this matter	to the following:	
		Lynn Lee Name of Person	
		Name of Person	
	Gulfstrea	m Construction Services, LLC	<u> </u>
		Firm/Company	مين دين مين
	67	742 N.W. 17th Avenue	THE SEP-L
		Address	
	For	t Lauderdale, FL 33309	SEP-L M 7:43
		City/State and Zip Code	
	E-mail address: (ynn@decktight.com to be used for future annual report notifica	tion) 5
For further information	concerning this matter, please of	call:	
Nomo	Lynn Lee of Person	at (954) 97 Area Code & Daytime T	70-8565
Iname	of reison	Area Code & Daytille 1	elephone (valuoci
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 enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (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**

GUITSTFEE (Name of the Limited (A	AM CONSTRUCTION SERVICES, Liability Company as it now appears of Florida Limited Liability Company)	on our records.)		
The Articles of Organization for this Limited Li		12/24/2009	and assigned	
This amendment is submitted to amend the follo				
A. If amending name, enter the new name of				
The new name must be distinguishable and end wit 'L.L.C."	h the words "Limited Liability Company	," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if applica	able:	-1	. <u>E</u>	
(Principal office address MUST BE A STREE	T ADDRESS)		SEP	
Enter new mailing address, if applicable:			できるし	
(Mailing address MAY BE A POST OFFICE I	BOX)		47. 5	
-				
B. If amending the registered agent and/oregistered agent and/or the new registered of	fice address here:			
Name of New Registered Agent:	Mr. Kelly M. Kyle			
New Registered Office Address:	6742 N.W. 17th Avenue		 	
Enter Florida street address				
	Fort Lauderdale	, Florida		
	City		Zip Code	
Ni D	1 ! - 4 1			

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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records:</u>

MGR = Manager

MGRM = M	lanaging Member	r	
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM_	Spreen, Richard P	6742 N.W. 17th Avenue Fort Lauderdale, FL 33309	Add ☑ Remove
			Add Remove
·			Add Remove
	· · · · · · · · · · · · · · · · · · ·		Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	TILED
Dated	August 16,		
	Signature of a	member or authorized representative of a member Lynn Lee Typed or printed name of signee	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00