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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : SMART TAX

Account Number : I20090000034

Phone

: (954)782-3610

Fax Number

: (954)366-3239

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:		
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RCR PAINTING & WATERPROOFING LLC

Certificate of Status	0
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SEP 23 2015

Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H) SUE) - A FIJZ 3 N FILED 2015 SEP 22 PM 2:11 TALLAHARY OF S:

RCR PAINTING & WATERPROOFING LLC	TALLAHASSEE, FLORIDA bility Company)
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.)
(A Florida Limited Lia	bility Company)
The Articles of Organization for this Limited Liability Company w	rere filed on 02/16/2010 and assigned
Florida document number L10000020366	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabili	ty company here:
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
•	
B. If amending the registered agent and/or registered office address here:	ce address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
	Entau Florida straat uddraee

## 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 605, 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

\_, Florida \_

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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effective date is listed, the date must be. If the date inserted in this block	be specific and cannot be prior to de	ate of filing or more than 90 da	ays after filing.) Pursuant to 605.0 nts, this date will not be listed	)207 (3)(b) d as the
ment's effective date on the Dep	partment of State's records.			
ecord specifies a delayed a e 90th day after the recor	effective date, but not ar rd is filed.	effective time, at 12	2:01 a.m. on the earlier	r of:
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SEPTEMBER 15	2015			
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