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D. BRUCE

APR 15 2010

**EXAMINER** 

## **COVER LETTER**

TO:	Registration S Division of Co				
SUBJI	ECT:		truction Services L	LC	
		Name of Lim	ited Liability Company		
The en	closed Articles of	f Amendment and fee(s) are sul	omitted for filing.		
Please	return all corresp	ondence concerning this matter	to the following:		
			George G Pappas		-
			Name of Person		
George G Pappas P.		eorge G Pappas P.A.		_	
	Firm/Company				
	1822 N Belcher Road, Suite 200			_	
	Address				
		Cle	earwater, Florida 3376	S5	<b>.</b> 5
		City/State and Zip Code			
		E-mail address: (	bmazas@mac.com to be used for future annual repo	ort notification)	
For fur	ther information	concerning this matter, please of	•	,	RIVEY OF SI
	Geo	orge G Pappas	727 .	447-4999	PM 23 35
		of Person	Area Code &	447-4999  Daytime Telephone Number	39
Enclos	ed is a check for t	the following amount:			
\$25	i.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	closed) Certifie	ate of Status &
	MAIL	LING ADDRESS:	STREET/C	OURIER ADDRESS:	

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

Regency Co	nstruction Services	LLC	<u></u>
( <u>Name of the Limited Liabilit</u> (A Florida	Limited Liability Company)	is on our records.	
The Articles of Organization for this Limited Liability (	Company were filed on	04/06/2010	and assigned
Florida document number L10000036848			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	nited liability company he	<u>re</u> :	
Regency Const	ruction & Developmen	t LLC	
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Comp	any," the designation "L	LC" or the abbreviation
			<b>E</b>
Enter new principal offices address, if applicable:			A
(Principal office address MUST BE A STREET ADD)	KESS)		<del>₹</del> 3 1
			A F
Enter new mailing address, if applicable:			3 3 11
(Mailing address MAY BE A POST OFFICE BOX)			BA D
muning uduress MAT BEAT TOST OF FICE BOA	<del></del>		<b>S 3</b>
			-
B. If amending the registered agent and/or regis		our records, <u>enter t</u>	he name of the nev
registered agent and/or the new registered office add	<u>lress here</u> :		
Name of Nav. Basistand Avant.			
Name of New Registered Agent:	<del></del>		
New Registered Office Address:	F	nter Florida street add	lungs
	£,	ner Pioriaa sireet aaa	<i>।</i> ७३४
	City	, Florida	Zip Code
	City		zip Couc

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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Type of Action** Title <u>Name</u> Address Add Remove ☐ Add Remove \_ Add Remove ☐ Add Remove □Add \_\_\_Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) April 8 2010 Dated \_\_\_\_\_ Signature of a member or authorized representative of a member George G. Pappas, Attorney and authorized representative Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00