## · L10000038208

(Request	tor's Name)	<del></del>		
(Address	)			
(Address	)			
(City/Sta	te/Zip/Phone	<del>• #)</del>		
PICK-UP	] WAIT	MAIL		
(Busines	s Entity Nan	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing	Officer:			

Office Use Only



500189021435

01/18/11--01028--002 \*\*30.00

2011 JAN 18 PM & 52 SECRETARY OF STATE TALEAHASSEF, FI OPION

C. LEWIS

JAN 1 9 2011

EXAMINER

## COVER LETTER

TQ: Registr	ation Section n of Corporations				
SUBJECT:	Reno Building, LLC.				
SUBJECT:	Name of Limited Liability Company				
The enclosed Ar	ticles of Amendment and fee(s) are submitted for filing.				
Please return all	correspondence concerning this matter to the following:				
	David M. Reno				
	Name of Person				
	Reno Building, LLC.				
	Firm/Company				
	3708 W. Cleveland St.				
	Address				
	Tampa, Florida 33609				
	City/State and Zip Code				
	davidr@renobuilding.com  E-mail address: (to be used for future annual report notification)				
For further infor	mation concerning this matter, please call:				
	David Reno at (_813 ) 885-7366				
	Name of Person Area Code & Daytime Telephone Number				
Enclosed is a che	eck for the following amount:				
\$25.00 Filing	Fee \$\sumset\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\				
o o magno segm	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Ciffon Building Tallahassee, FL 32314 Ciffon Building Tallahassee, FL 32301				
	The state of the s				

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
2011 JAN 18 PM & 52

	Reno Bu	ilding, LLC.	TALL	AHASSEE, FLORIDA	
(Name	e of the Limited Liability Com (A Florida Limited	pany as it now appear I Liability Company)	rs on our records.)	- CEC, FEURIDA	
The Articles of Organization for	this Limited Liability Compa	ny were filed on	05.01.10	and assigned	
Florida document number	L10000038208				
This amendment is submitted to	amend the following:				
A. If amending name, enter th	e new name of the limited li	ability company her	<u>re</u> :		
The new name must be distinguish "L.L.C."	able and end with the words "Li	mited Liability Compa	any," the designation "	LLC" or the abbreviation	
Enter new principal offices add	dress, if applicable:				
(Principal office address MUST	BE A STREET ADDRESS)				
		<del></del>		<del></del>	
Enter new mailing address, if applicable:		5318 W. Crei	nshaw St		
(Mailing address MAY BE A POST OFFICE BOX)		Tampa, Florida 33634			
B. If amending the registere registered agent and/or the new	ed agent and/or registered v registered office address h	office address on o	our records, <u>enter</u>	the name of the new	
Name of New Register	ed Agent:				
New Registered Office	Address:	En	ter Florida street add	dress	
		, Florida			
		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 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
<u>VP</u>	Randall J. Hilgeman	5318 W. Crenshaw St. Tampa, Florida 33634	_☑ Add □ Remove
			Add Remove
			Add Remove
<del></del>			Add Remove
			Add Remove
			Add Remove
D. If amendin	g any other information, enter change(s	) here: (Attach additional sheets, if necessary.)	_
			-
			2011 J
Dated		M///// - E	TILE MIIO M
	Da	authorized representative of a member  vid M. Reno  printed name of signee	1 D

Page 2 of 2

Filing Fee: \$25.00