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SECRETARY OF STATE

COVER LETTER

TO:	Registration Se Division of Cor		•	
SUBJEC	cr: Contr	raras Construc	ition Services L.L.	<i>C</i> .
			ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sul	bmitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	r to the following:	
		Caeser	Contreras Name of Person	
			Name of Person	
		Contract Con	Struction Sorrices L.	L.C. (
		201111100	Firm/Company	<u> </u>
		_		
		34934 Bax	Address	
		Dade cit	4 Fl. 33525	
			Y FI 23525 City/State and Zip Code	
		Contraras, rub	to be used for future annual report notification	
		E-mail address: (to be used for future annual report notification)
For furth	er information co	oncerning this matter, please of	call:	
Ruse	en Contr	Person	at 357, 467-3955	5
	Name of	Person	Area Code & Daytime Telep	ohone Number
\mathcal{A}		e following amount:	_	
V]\$ 25.0	0 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		NG ADDRESS: ation Section	STREET/COURIER A	DDRESS:
Division of Corporations P.O. Box 6327		n of Corporations	Division of Corporations Clifton Building	
		ssee, FL 32314	2661 Executive Center C	ircle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited L (A F	lability Company as it now appears on our records.) Iorida Limited Liability Company)					
The Articles of Organization for this Limited Liab Florida document number <u>L/0000</u> 563	bility Company were filed on May. How Dollar and assigned and assigned					
This amendment is submitted to amend the follow	ving:					
A. If amending name, enter the new name of t						
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company," the designation "LLC" or the abbreviation					
Enter new principal offices address, if applical	ole:					
(Principal office address MUST BE A STREET ADDRESS)						
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B B. If amending the registered agent and/or registered agent and/or the new registered office of New Registered Agent:	registered office address on our records, enter the name of the new					
	ميد معالمة					
New Registered Office Address:	Enter Florida street address					
	Florida					
	City Zip Code					
New Registered Agent's Signature, if changing Registered Agent:						
the provisions of all statutes relative to the pro accept the obligations of my position as regist	agent and agree to act in this capacity. I further agree to comply with oper and complete performance of my duties, and I dm familiar with and ered agent as provided for in Chapter 608, F.S. Or, if this document is egistered office address, I hereby confirm that the limited liability hange. Il Changing Registered Agent, Signature of New Registered Agent					

Page 1 of 2

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>	<u>Name</u>	Address	Type of Action	
MGA	Caesar Contreres	13623 Dock lake Conal Ro Duce City Fl. 3395	Add Remove	
			Add Remove	
	· · · · · · · · · · · · · · · · · · ·		Add Remove	
			Add Remove	
			Add Remove	
·.			Add	
D. If ai		ge(s) here: (Attach additional sheets, if necessary. The Sole Company of		
Dated _	6-02-2010 Pl H J. Signature of a member	er or authorized representative of a member		
	Rusen Controlas Typed	Jr. I or printed name of signee		

Page 2 of 2

Filing Fee: \$25.00