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COVER LETTER

TO:

Registration Section
Division of Corporations

G4 CONSTRUCTION COMPANY LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JUSTIN R GEORGE

Name of Person

G4 CONSTUCTION COMANY L.LC

Firm/Company

902 MCGEE RD

Address

BONIFAY, FL 32425

City/State and Zip Code

JRYANGEORGE@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JUSTIN R GEORGE

,_,850_`541-1005

Name of Person

Area Code

Daytime Telephone Number

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

G4 CONSTRUCTION CO		ny as it now appears on our records.) Clability Company)		
The Articles of Organization for this Limited L Florida document number L1000058358 This amendment is submitted to amend the foll	iability Company		and assign	ned
A. If amending name, enter the new name o	f the limited liab	ility company here:		
The new name must be distinguishable and end with the	words "Limited Liab	oility Company," the designation "LLC" of	or the abbreviation "L.L	C."
Enter new principal offices address, if applicable:		JUSTIN R GEÖRGE		
(Principal office address MUST BE A STREET ADDRESS)		902 MCGEE RD		
		BONIFAY, FL 32425		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	ROY		14 SEP	Statement of the statem
B. If amending the registered agent and	or registered o		enter the name of	the new
registered agent and/or the new registered o	ffice address her	<u>e</u> :	맞면 그	
Name of New Registered Agent:	JUSTIN R	GEORGE		
New Registered Office Address:	902 MCGE	Enter Florida street address		
	BONIFAY		_{da} 32425	

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 duries, 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.

City

If Changing Registered Agent Signature of New Registered Agent

Zip Code

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	CLIFTON R HAMMACK	2387 JOE WHITE RD	Add
		BONIFAY, FL 32425	■ Remove
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			Remove
		-	
			□ Remove
			
			Add Remove
			P-0 I
			FLORIDA FLORIDA
			□ Remove
-			□ Add
			□ Remove

f amending any other information, enter change(s) here	: (Attach additional sheets, if necessary.)
•	
Effective date, if other than the date of filing: The effective date must be specific, cannot be prior to date of receipt or fil the date this document is filed by the Florida Department of State)	(optional) led date and cannot be more than 90 days after
C , 0, 111	
Dated Soptember 3, 2014	- Que
ARunC	rized representative of a member

Page 3 of 3

Filing Fee: \$25.00

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