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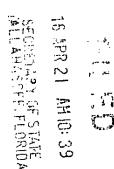
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COVER LETTER

Div	ision of Corpo	orations			
SUBJECT:		ms Construction, LLC			
SUBJECT:	-	Name of Limi	ted Liability Company		_
The enclosed	d Articles of A	mendment and fee(s) are subt	nitted for filing.		
Please return	all correspond	dence concerning this matter t	to the following:		
		Raymond A. Biernacki, Jr.			<u></u>
			Name of Person		
		Biernack & Biernacki, P.A.			
	*** * *	,	Firm/Company		
		2667 Enterprise Road	,		
			Address		
		Orange City, FL 32763			
			City/State and Zip Code		
		lacatfish@earthlink.net			→
		E-mail address: (t	to be used for future annual repo	ort notification)	
For further i	nformation co	ncerning this matter, please ca	all:		
Raymond A	. Biernacki, Jr.		386 775-19		
	Name of	Person	Area Code	Daytime Telephone Nur	nber
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 enclose	Certi	Filing Fee, ficate of Status & fied Copy ional copy is enclosed)

Registration Section

TO:

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

Carelli Williams Construction, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on June 29, 2010 and assigned Florida document number L10000069294 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: S-C-W Construction, LLC 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 on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida _

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
		···	
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			Add
			□ Remove
			Change
			
			□ Remove
		 	Change
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			Change
			Add ARRIVED Remove
			Remove Remove AH Change Change Add
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Filing Fee: \$25.00