

L100000075911

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

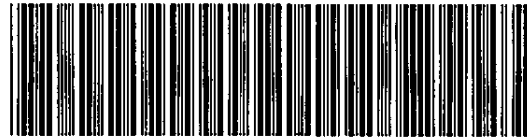
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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APR 24 2014

J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: T2 Construction Management, 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:

Thomas Files

Name of Person

T2 Construction Management, LLC

Firm/Company

2695 NW 4th Street

Address

Ocala, FL 34475

City/State and Zip Code

tfiles1979@gmail.com

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

For further information concerning this matter, please call:

Tom Files

Name of Person

at (352) 572-2084

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

T2 Construction Management, 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 19 Oct 2011 and assigned
Florida document number L10000075911.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

2695 NW 4th Street

(Principal office address MUST BE A STREET ADDRESS)

Ocala, FL 34475

Enter new mailing address, if applicable:

2695 NW 4th Street

(Mailing address MAY BE A POST OFFICE BOX)

Ocala, FL 34475

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

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 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.

If Changing Registered Agent, Signature of New Registered Agent

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FLORIDA
JULIA A. HARRIS, CLERK

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:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Stacey L Files	101 SW 140th Terrace Suite B	<input type="checkbox"/> Add
		Newberry, FL 32669	<input checked="" type="checkbox"/> Remove
MGRM	Kendall Holdings, LLC	PO Box 3038	<input checked="" type="checkbox"/> Add
		Ocala, FL 34478	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove

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 CLERK OF SUPERIOR COURT
 FLORIDA

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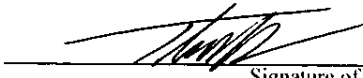
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Tom Files will be relinquishing 20% (Twenty Percent) ownership
of T2 Construction Management to Kendall Holdings, LLC.
Tom Files will maintain 80% (Eighty Percent) ownership of
T2 Construction Management, LLC.

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after
the date this document is filed by the Florida Department of State)

Dated April 1st, 2014.



Signature of a member or authorized representative of a member

Thomas Edward Files Jr.

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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CLERK OF STATE
TALLAHASSEE FLORIDA