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| (Requestor's Name) | | | | | | |
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| PICK-UP WAIT MAIL | | | | | | |
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| (Document Number) | | | | | | |
| Certified Copies Certificates of Status | | | | | | |
| Special Instructions to Filing Officer: | | | | | | |
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Office Use Only



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SECRETARY OF STATE
FALLAHASSEE, FLORIN,

D. BRUCE

SEP 15 2010

EXAMINER

COVER LETTER

| то: | | , tion Section of Corpor | | | | | | | |
|---|--|---------------------------------|--|---|--------------------------------|---------------------|--|-------------------------|-------|
| SUBJE | ·CT· | | Anderson C | ontracting E | TC LLC | | | | |
| SOLUE | | | | nited Liability Con | | | _ | | |
| | | | | | | | | | |
| The end | losed Artic | cles of Am | endment and fee(s) are su | abmitted for filing. | | | | | |
| Please r | return all co | orresponde | ence concerning this matte | er to the following: | | | | | |
| | | • | Ŭ | J | | | | | |
| | | | | Harold And | erson | | | | |
| | | - | | Name of Pe | | | | | |
| | Anderson Contracting ETC LLC | | | | | | | | |
| Firm/Company | | | | | | | _ | | |
| | 42.476 Symptoma Street | | | | | | | | |
| | 13476 Sunstone Street Address | | | | | | | | |
| | | | | | | | | | |
| | Jacksonville, FL. 32258 City/State and Zip Code | | | | | | _ ⊋ _{ເລ} | | |
| Hander48@att.net | | | | | | | | 10 S | _ |
| | | - | E-mail address: | (to be used for futur | e annual report noti | fication) | ETA HAS | [P | |
| For furt | ther inform | ation conc | erning this matter, please | call: | | | TARY O | <u>+</u> | FILED |
| | | Harold | Anderson | at (_95 | 2 、 | 327-1268 | ⊮ FL | - 134 - 134 - 134 | |
| Harold Anderson Name of Person | | | at (| Area Code & Daytin | | ber E | ယ | \cup | |
| | | | | | | | A | | |
| Enclose | ed is a chec | k for the f | ollowing amount: | | | | | | |
| \$25 | .00 Filing I | F ec | \$30.00 Filing Fee & Certificate of Status | \$55.00 Fili Certified (addition | | Certif d) Certif | Filing Fee ficate of St fied Copy tional copy | atus & | |
| MAILING ADDR Registration Section Division of Corpor P.O. Box 6327 Tallahassee, FL 32 | | on Section of Corporations 6327 | | STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3 | on orations enter Circle | 3 : | | | |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| ETC. LLC | | | | | |
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| ppears on our records.) any) | | | | | |
| July 29, 2010 and assigned | | | | | |
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| y here: | | | | | |
| Company," the designation "LLC" or the abbreviation | | | | | |
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| on our records, enter the name of the ne | | | | | |
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| Enter Florida street address | | | | | |
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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 | <u>Address</u> | Type of Action |
|--------------|---|--|----------------|
| MGR | Harold Anderson | 13476 Sunstone Street Jacksonville, FL 32258 | ✓ Add Remove |
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| | was a second of the second of | | Add Remove |
| | | | Adđ Remove |
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| D. If amend | ding any other information, enter | change(s) here: (Attach additional sheets, if neces. | 7 TEN 0 |
| | | | SEP 14 PM 10 3 |
| Dated | N | Il lef | |
| | Signature of a r | Harold Anderson Typed or printed name of signee | |

Page 2 of 2

Filing Fee: \$25.00