#1/00008/013

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(Madress)
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K.BALY EXAMINER JAN 5 2011

COVER LETTER

Division of Co					
SUBJECT:	New Beginnings	Trim and Carpentry, L	LC		
-	Name of Lim	ited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.			
Please return all corresp	condence concerning this matte	r to the following:			
		Bobby R. Tucker Jr.			
		Name of Person			
New Beginnings Trim and Carpentry, LLC					
	= .	Firm/Company			
500 22nd Street					
		Address			
	•	Niceville, FL 32578 City/State and Zip Code			
		to be used for future annual report no	ouncation)		
For further information	concerning this matter, please	call:	,		
Bob	by R. Tucker Jr.	at (850)	218-9803		
Name	of Person	Area Code & Day	218-9803 time 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 & Sed) Certified Copy (additional copy is enclosed)		

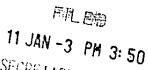
MAILING ADDRESS:

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



New Beginnings Trim and Carpentry, LLC FALL AFFASSEE, FLORIDA

(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 Liab	ility Company were filed on	August 03, 2010	and assigned	
Florida document numberL100000810	13			
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of th	e limited liability company h	ere:		
The new name must be distinguishable and end with the "L.L.C."	he words "Limited Liability Com	pany," the designation "LL	C" or the abbreviation	
Enter new principal offices address, if applicable	le:			
(Principal office address MUST BE A STREET A	ADDRESS)			
Enter new mailing address, if applicable:	-			
(Mailing address MAY BE A POST OFFICE BO	<u></u>			
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter the	e name of the new	
Name of New Registered Agent:				
New Registered Office Address:				
	E	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 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

Dated _

MGRM = Managing Member Type of Action <u>Title</u> <u>Name</u> Address MGRM Sonny Goodson 368 Osbourne Drive _ Add ✓ Remove Fort Walton Beach____ FL 32548 Shelly Goodson MGR ☐ Add 368 Osbourne Drive Fort Walton Beach FL 32548 MGRM Phillip T. Tucker 500 22nd Street ✓ Add Niceville, FL 32578 Remove Add Remove ∏Add Remove \prod Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

December 29 , 2010 .

Signature of a member or authorized representative of a member

Bobby R. Tucker Jr.

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00