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C. LEWIS

AUG 1 9 2010

EXAMINER

COVER LETTER

! . , <u>.</u>

P.O. Box 6327

Tallahassee, FL 32314

TO:		gistration S vision of Co					
SUBJE	c CT:	.ê	Powerhou	use Frame L.L.C.			
The end	close	d Articles o	f Amendment and fee(s) are sul	bmitted for filing.			
Please 1	retur	n all corresp	ondence concerning this matter	r to the following:			
				Brandy James			
				Name of Person			
		Firm/Company					
			1844 Keswick Rd.				
				Address			
			St. Augustine,Fl. 32084 City/State and Zip Code				
			E-mail address: (to be used for future annual report not	ification)		
For furt	ther	information	concerning this matter, please of	call:			
			randy James of Person	at (904)	325-1133 me Telephone Number		
			0. 1 Cloud	, ada esas a saja	nie respione rame.		
Enclose	ed is	a check for	the following amount:				
\$25	.00 F	Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
		Regist	LING ADDRESS: tration Section	Registration Sect			
Division of Corporations		Division of Corp	orations				

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2010 AUG 18 AM N: 86

(Name of the Limited (A	owerhouse frame L.L.C. Liability Company as it now appears Florida Limited Liability Company)	on our records.	SECRETARY OF STAT TALLAHASSEE, FLORI
The Articles of Organization for this Limited Li Florida document numberL10000084		August 11,2010	and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	the limited liability company here	:	
The new name must be distinguishable and end with "L.L.C."	h the words "Limited Liability Compan	y," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applica	able:		
(Principal office address MUST BE A STREE	TADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	-	
B. If amending the registered agent and/or the new registered of		ır records, <u>enter</u>	the name of the new
Name of New Registered Agent:	David James		
New Registered Office Address:	1844 Keswick Rd.		
		r Florida street ad	
•	St. Augustine City	, Florida _	32084 Zîp 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.

1 Changing Registered Agent; Nig

Page 1 of 2

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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Brandy James	1844 Keswick Rd.	Add ✓ Remove
MGR	David James	1844 Keswick Rd.	✓ Add ☐ Remove
			Add Remove
			Add Remove
 -			AddRemove
			AddRemove
D. If amer	nding any other information, e	nter change(s) here: (Attach additional sheets,	if necessary.)
_			
	A		2010 AL
Dated	August 13	, 2010	2010 AUG 18 SECRETARY AULAHASSI
	Signature	of a member or authorized representative of a member Brandy James	
		Typed or printed name of signee Page 2 of 2	ORIDI
		1 age 2 UI 2	

Filing Fee: \$25.00