# L10000084696

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# **COVER LETTER**

Division of C				
SUBJECT:	West Volusia	Construction, L.L.C.		
	Name of Lin	aited Liability Company		
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.		
Please return all corres	pondence concerning this matte	t to the following:		
		Tison King	· · · · · · · · · · · · · · · · · · ·	
		Name of Person	75 <b>5</b>	
	Mid F	Iorida Construction, L.L.C.	ES & T	
Firm/Company				
			ANASSEE, FLORID	
		P.O. Box 51 Address	The B	
		Address		
		DeLand, FL 32721	왕 9	
	*	City/State and Zip Code		
		tison@tisonking.net		
	E-mail address:	to be used for future annual report notifica	ation)	
For further information	concerning this matter, please	cali:		
	Tison King	at ( 386 ) 8	04-4712	
Name of Person		Ares Code & Daytime	Celephone Number	
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	[1\$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



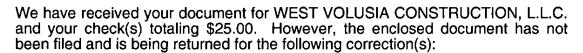
### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 17, 2010

TISON KING MID FLORIDA CONSTRUCTION, L.L.C. P.O. BOX 51 DELAND, FL 32721

SUBJECT: WEST VOLUSIA CONSTRUCTION, L.L.C.

Ref. Number: L10000084696



The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

#### Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is #P08000063057, MID FLORIDA CONSTRUCTION, INC..

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 510A00019738

www.sunbiz.org

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# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

West Volusia Cor	struction, L.I	L.C	SEF
(Name of the Limited Liability Compa (A Florida Limited L	ny e <b>s it now appea</b> liability Company)	rs on our records.)	F.S. F.
The Articles of Organization for this Limited Liability Company Florida document numberL10000084696	were filed on	08/12/2010	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company he	Gē:	
Mid Florida Construc	tion Group, L.L	.C.	
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Compa	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:	591 Lake Pe	arl Drive	
(Principal office address MUST BE A STREET ADDRESS)			
	Lake Helen,	FL 32744	
Enter new mailing address, if applicable:	P.O. Box 51		
(Mailing address MAY BE A POST OFFICE BOX)			
	DeLand, FL	32721	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		our records, <u>enter ti</u>	e name of the new
Name of New Registered Agent:	······································		
New Registered Office Address:	<i>E</i>	ter Florida street addr	
	EA.	er x iorida sire <b>e</b> i <b>agar</b>	হয় :
	City	, Florida	Tim Code
	Cny		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 = Ma MGRM = N	n <del>ager</del> Innaging Memb <del>er</del>		
Title	Name	Address	Type of Action
			Add Remove
			☐ Add ☐ Remove
			Add
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary	.)
			10 SI SECRE
Dated			FILE EP -3
		2//	PN 4:07
	Signature of a membe	r or authorized representative of a member	<u>-8</u> 7
	Турес	f or printed name of signee	

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Filing Fee: \$25.00