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| (Re | equestor's Name) | · |
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| (Cit | ry/State/Zip/Phone | e #) |
| | ☐ WAIT | |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

| | ision of Cor | | | |
|--------------------|---------------|--|---|---|
| SUBJECT: | A C Richard | ison Concrete Masonary Co.L | LC | |
| JOBO ECT. | | Name of Lim | ited Liability Company | |
| The enclosed | l Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please return | all correspo | ndence concerning this matter | to the following: | |
| | | Arthur Richardson | | |
| | | | Name of Person | |
| | | | Firm/Company | |
| | | 4950 N. US Highway 441 | | |
| | | | Address | |
| | | Ocala, Florida 34475 | City/State and Zip Code | |
| | | rosierichardson1944@gmai | l.com | |
| For further in | nformation co | e-mail address: (| to be used for future annual report notifi all: | cation) |
| Arthur Rich | ardson | | 352 622 7007 | |
| | Name of | Person | | Telephone Number |
| Enclosed is a | check for th | e following amount: | | |
| ■ \$25.00 F | iling 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| A C Richardson Conctete Masonary Co | • | • |
|--|---|----------------------------------|
| (Name of the Limited I (A ? | <u>lability Company as it now appears on our rec</u> e lorida Limited Liability Company) | ords.) |
| The Articles of Organization for this Limited Liabi | lity Company were filed on 08/24/2010 | and assigned |
| Florida document number L10000088849 | , | |
| This amendment is submitted to amend the following | ng: | |
| A. If amending name, enter the new name of the | e limited liability company here: | |
| The new name must be distinguishable and contain the words | "Limited Liability Company," the designation "L | LC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable | e: | |
| (Principal office address MUST BE A STREET A | DDRESS) | |
| | | |
| | | |
| 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 | | rds, enter the name of the ne |
| | | A 2 4 |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida street add | ress |
| _ | | 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|--|-----------------------|----------------|
| AMBR | Seunarine Seunarine | 4304 David Ave. | ■ Add |
| | | Orlando, Fl 32839 | ☐ Remove |
| | | | · Change |
| AMBR | Willam J Brook | 6620 NE 2nd PLace | Add |
| | | Ocala, Fla 34470-2209 | □ Remove |
| | | | ☐ Change |
| | ······································ | | |
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| ffective date, if other than the date of filing: | (ontional) |
| an effective date is listed, the date must be specific and cannot be prior to date of filing or lote: If the date inserted in this block does not meet the applicable statutory file ocument's effective date on the Department of State's records. | r more than 90 days after filing.) Pursuant to 605.0207 |
| e record specifies a delayed effective date, but not an effective The 90th day after the record is filed. | e time, at 12:01 a.m. on the earlier of |
| | |
| May 2 , 2017 | |

Page 3 of 3

Filing Fee: \$25.00