

L10000091237

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

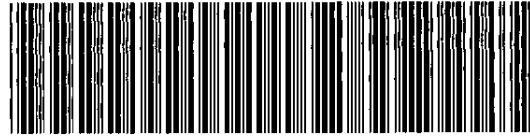
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2011 JUL -6 PM 4:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

Morningside Construction, LLC
Name of Limited Liability Company

FILED
2011 JUL -6 PM 4:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

David E. Torres.

Name of Person

Firm/Company

3921 Prospect Ave.

Address

Naples, FL 34104.

City/State and Zip Code

david@flstardevelopment.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David E. Torres

Name of Person

at (904) 762 4454.

Area Code & Daytime 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 &
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

Morningside Construction, LLC

(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 Liability Company were filed on 08/31/2010 and assigned
Florida document number L10000091237

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Arc Tech Construction Services, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

2219 Flint Dr.
Fort Myers, FL 33916

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

3921 Prospect Ave
Naples, FL 34104

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

David E. Torres

New Registered Office Address:

3921 Prospect Ave.

Enter Florida street address

Naples

City

, Florida

34104

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
MGRM = Managing Member

Title	Name	Address	Type of Action
MGRM	David E. Torres	12600 Biscayne Ct. Naples, FL 34105	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	David E. Torres	3921 Prospect Ave Naples, FL 34104	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Silvana M. Navarro	3921 Prospect Ave Naples, FL 34104	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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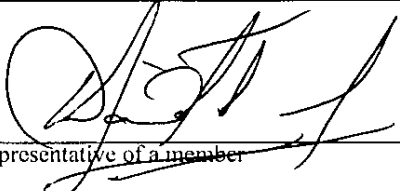
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 JUN 6 PM 4:21

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated July 8, 2011.



Signature of a member or authorized representative of a member

DAVID E. TORRES

Typed or printed name of signee