1.10000 101291

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)	,, <u> </u>		
(Ĉit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	ısiness Entity Nar	ne)		
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



400187336484

11/08/10--01038--005 *#25.00

TILLLU
10.NOV-8 PM 5: 08
SECRETARY OF STATE
AFLAHASSEE, FLORID

D. BRUCE
NOV 9 2010
EXAMINER

COVER LETTER

TO: Registration Section . Division of Corporations .							
SUBJECT: His Paniola Cement L.L.C Name of Limited Liability Company							
The enclosed Articles of Amendment and fee(s) are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
ALBERT C. ROGERS Name of Person							
Name of Person (N/A)							
Firm/Company							
1803 NW 137 LB AUE Address							
Address							
Address Finbloke Panes							
City/State and Zip Code							
ALBERT CROGETS (a)AHOD. COM							
For further information concerning this matter, please call:							
ALBERT C. RoCieres at (586 615 - 7819. Name of Person Area Code & Daytime Telephone Number							
Name of Person Area Code & Daytime Telephone Number							
Enclosed is a check for the following amount:							
\$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status & 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

OF			
(Name of the Limited Liability Company (A Florida Limited Lia	y as it now appears on our record	<u>s.</u>)	
The Articles of Organization for this Limited Liability Company w	vere filed on <u>09/28/20</u>	and assigned	
Florida document number <u>L 10000101391</u> .	, .		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabili	ity company here:		
(N/A)			
The new name must be distinguishable and end with the words "Limite "L.L.C."	d Liability Company," the designa	tion "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	- SAME -		
(Principal office address MUST BE A STREET ADDRESS)		2/4	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:		HASSET ON S. D.	
Name of New Registered Agent:	PAME -		
New Registered Office Address:			
	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 the provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	te performance of my duties, a ovided for in Chapter 608, F.S	and I am familiar with and S. Or, if this document is	

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR≠ Manager

\	= Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>YGRM</u>	JED Exbet and Inbit	5340 NW 161 \$\frac{5}{2}	Add Remove
			Add Remove
			Add Remove
			Add Remove
		-	AddRemove
			Add Remove
D. If an	nending any other information, enter char	nge(s) here: (Attach additional sheets, if necessary), (= = =
	AS AN Adithion Of Historiola Cem	Tell Exports and Imports Al Managing Menber ent L. L. C.	10 NOV -8 PM
Dated	Obtober 13, 20	010 <u>.</u> . AM/ AM/M	5: 08
	Signature of a memb	per or authorized representative of a member	
	TERRY COLLAD	ed or printed name of signee	SHALL.

Page 2 of 2

Filing Fee: \$25.00