## L10000114665

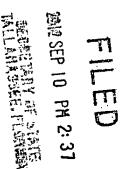
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800239346668

09/10/12--01022--018 \*\*75.00



J. BRYAN

SEP 11 2012

EXAMINER

37837 Meridian Avenue, Suite 100 Dade City, FL 33525 (P.O. Box 2337, Dade City, FL 33526-2337) Tax ID# 59-2985033



Telephone: 352.567.2500 General Fax: 352.567.6813 Real Estate Fax: 352.567.0457 Toll Free: 888.828.7522 www.dadecitylaw.com

ELLED OFF.38

September 5, 2012

## **SENT VIA US REGULAR MAIL**

Florida Department of State Division of Corporations Attn: Registration Section Post Office Box 6327 Tallahassee, FL 32314

Articles of Amendment for Restoration and Consulting Innovations, LLC

Document Number: L10000114665

To Whom It May Concern:

Re:

Enclosed, please find the Articles of Amendment for **RESTORATION AND CONSULTING INNOVATIONS**, **LLC**, (document number L10000114665) along with this firm's check representing the Twenty-Five and No/100 Dollars (\$25.00) fee to file the Articles of Amendment.

Please return all correspondence concerning this matter to my attention, at the address indicated herein.

Should you have any questions, please feel free to call me, or my assistant, Linda Armstrong, at (352) 567-2500.

Very Truly Yours,

JOHNSON, AUVIL, BROCK & PRATICO, P.A.

Sheada Madani

/smp

(Enclosures as Indicated)

udam.

ecc: Restoration and Consulting Innovations, LLC

W:\client\SM\ADVANCED PIER TECHNOLOGY, LLC\RCI (General - Corporate)\Correspondence\State.ltr01 (Articles of Amendment) 9-5-12.docx

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

SR 10 PAZ Restoration and Consulting Innovations, 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 11/03/2010 and assigned Florida document number \_\_\_\_\_L10000114665 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 37837 Meridian Ave. Suite 100 Enter new principal offices address, if applicable: Dade City, FL 33525 (Principal office address MUST BE A STREET ADDRESS) 37837 Meridian Ave. Suite 100 Enter new mailing address, if applicable: Dade City, FL 33525 (Mailing address MAY BE A POST OFFICE BOX) 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: Sheada Madani, Esquire Name of New Registered Agent: 37837 Meridian Ave. Suite 100 New Registered Office Address: Enter Florida street address

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 Type of Action **Title** <u>Name</u> **Address** MGR Frank Miller ☐ Add 703 Lamar Avenue Brooksville, FL 34601 Remove Sheada Madani MGR 37837 Meridian Ave. Ste. 100 **✓** Add Remove Dade City, FL 33525 ☐ Add Remove ☐ Add Remove  $\square$ Add Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) eptember 5, 2012. Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00