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EXAMINER FEB 2 2011

COVER LETTER

Division of Corporations
SUBJECT: Tames Henry Mills Painters Contractor 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:
James Henry Mills
Firm/Company
1911 West 20th Street
Jacksonville Florida 32209
Ciara matthews & bell south net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tames Henry Mills at (904) 924-5174 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:

\$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

\$30.00 Filing Fee &

Certificate of Status

\$25.00 Filing Fee

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

\$60.00 Filing Fee,

Certified Copy

Certificate of Status &

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED
11 FEB -2 PM.
SECRETARY OF STATE
ALLANA SCENT FILATE

James Henry Mills Painters Contractoril Florida.

(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 <u>January 3, 2011</u> and assigned Florida document number <u>L | 1000001096</u>.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of		
James Henry Mi	ills Painters	L.L.C.
The new name must be distinguishable and end with	the words "Limited Liability Compar	ny," the designation "LLC" or the abbreviation
"L.L.C."		
•		
Enter new principal offices address, if applica	ble:	
(Principal office address MUST BE A STREET	ADDRESS)	
·		
		-
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	(OX)	
		
B. If amending the registered agent and/or		ur records, <u>enter the name of the new</u>
registered agent and/or the new registered off	<u>ice address here</u> :	
Name of Name Desistant A. A. aut.		
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Fnt	er Florida street address
	5m	or I for the sir cor than cas
		, 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 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

CORD LA			m
<u>Title</u>	<u>Name</u>	Address	Type of Action
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D. If amend	ling any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)	
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<u>Dated</u> <u>ل</u>	nuary 28 , 21	011 .	
-	Ciana & alban	a matthalla	
,	Signature of a member	er or authorized representative of a member	
(Ciara Labora M	\atthews	

Page 2 of 2

Filing Fee: \$25.00