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SECRETARY OF STATE
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T. BROWN



## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Alliance Building Products, UC 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:
Pay/ Nowlan
Name of Person  Miance, Building trade its, UC  Firm/Company
111 Kelsey Lane Ste. A
Jampa, FL 33619 City/State and Zip Code  Paul nowlan @ alliance be net
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:
Name of Person  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \tag{Certificate of Status}  \tag{S55.00 Filing Fee \tag{Certified Copy} Certified Cop

MAILING ADDRESS:

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

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STREET/COURIER ADDRESS:

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

ARTIC	CLES OF AMENDMENT	E.
ARTIC	TO LES OF ORGANIZATIO	ON 13 NOW ED
	OF	TALECHE PL
(Name of the Limited L	Suiding Roucts ability Company as it now appears orida Limited Liability Company)	ON IS NOV 18 PM 4: 03  ON OUR records.)  FLORIDA
The Articles of Organization for this Limited Liab	ility Company were filed on //	4/2011 and assigned
Florida document number <u>L 1100000190</u>	5	
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of the	e limited liability company here	
The new name must be distinguishable and end with the "L.L.C."	he words "Limited Liability Compan	y," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET)	ADDRESS)	
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		r records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Ente	r 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 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 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

<u>Title</u>	Name	Address	Type of Action
MGRM	Ronald J. Wajda	5725 Foresterlake Dr. Sarasota, FL 34243	Add
	v	Savasota, FL 34243	Remove
			Add
			Remove
	·····		Add
			Remove
			Add
			Remove
			Remove
			Add
			Remove

D.	If mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	· · ·
Dat	ed November 12th, 2013
	fan I
	Signature of a member or authorized representative of a member
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00