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COVER LETTER

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TO: Registration S Division of Co				
Lang's	General Contracting & R	enovation, LLC		
SUBJECT:	Name of Lim	nited Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	John R. Lang			
		Name of Person		
•	Lang's General Con	tracting & Renovation, LLC		
	34 Sailfish Drive		2014 NOV 1 O	LC.F
			7070.7	
	Ponte Vedra Beach	, FL. 32082	· · · · · · · · · · · · · · · · · · ·	
		City/State and Zip Code	17:0	- Carrier
	jrlang01@gmail.com			44900
	E-mail address: (to be used for future annual report notif	ication)	
For further information	concerning this matter, please c	all:		
John R. Lang		904 422-6690		
Name	of Person		: 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

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lang's General Contractin						
(Name of the Lim	ited Liability Compa (A Florida Limited	any as it now appears o Liability Company)	n our records.)			
The Articles of Organization for this Limited I Florida document number L11000006062	Liability Company	were filed on 01-1	4-2011	and assigned		
This amendment is submitted to amend the fol	lowing:					
A. If amending name, enter the new name of	of the limited liah	oility company here	:			
The new name must be distinguishable and end with the	words "Limited Lial	bility Company," the des	signation "LLC" or the ab	breviation "L.L.C."		
Enter new principal offices address, if applicable:		34 Sailfish Drive				
(Principal office address MUST BE A STRE	ET ADDRESS)	Ponte Vedra B	Beach, FL. 32082			
Enter new mailing address, if applicable:				7 % TI		
(Mailing address MAY BE A POST OFFICE BOX)			8 5			
B. If amending the registered agent and registered agent and/or the new registered of				he name of the n		
Name of New Registered Agent:				· · · · · · · · · · · · · · · · · · ·		
New Registered Office Address:	34 Sailfish					
	5		street address			
	Ponte Vedr	a Beach City	, Florida <u>32</u> 0	J82 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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member Title **Name Address** Type of Action **AMBR** 791 Assisi Lane #104 Curtis J. Lang **■** Add Atlantic Beach, FL. 32233 ☐ Remove □ Add □ Remove Remove. □ Remove ☐ Add ☐ Remove

_□ Add

D.	If amending any other information, enter change(s) here: (Attach additional sheets, if necessary	necessary.)	
			
E.	Effective date, if other than the date of filing:		
	Dated 9lov-6, 2014.		
	Joh Rolana		
	Signature of a member or authorized representative of a member John R. Lang		
	Typed or printed name of signee		

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Filing Fee: \$25.00

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