# 110000011

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JUN - 8 2011

**EXAMINER** 

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SECKETARY OF STATE

## **COVER LETTER**

TO:	Registration Section Division of Corporations
SUBJE	CT: FCK Construction LLC  Name of Limited Liability Company
The end	closed Articles of Amendment and fee(s) are submitted for filing.
Please 1	return all correspondence concerning this matter to the following:
	Carlos Falcon; Name of Person
	Firm/Company
	11243 SW 245 th St Address
	Homes tead, FL 33032
	FCR construction of hotmail. com  E-mail address: (to be used for future annual report notification)
For furt	her information concerning this matter, please call:
	Name of Person at (305) 896 - 33/6  Area Code & Daytime Telephone Number
	d is a check for the following amount:
<b>Y</b> \$25.	00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & \text{Certified Copy (additional copy is enclosed)}} \text{\$\ \text{S60.00 Filing Fee, \text{Certified to of Status & \text{Certified Copy (additional copy is enclosed)}} \text{\$\ \text{Certified Copy (additional copy is enclosed)}} \text

### 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

FCR Constru	ction LL	$\mathcal{C}$	
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our recubility Company)	ords.)	
The Articles of Organization for this Limited Liability Company w			ed
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability of the limited liability of the new name must be distinguishable and end with the words "Limited "L.L.C."		gnation "LLC" or the abbro	 eviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office		s, enter the name of th	ne new
registered agent and/or the new registered office address here:			
Name of New Registered Agent:		<b>3</b> 00 -	
New Registered Office Address:	Enter Florida	Street addition 2	<b>1</b>
		lorida A	»
	City	Zip code	1 B
New Registered Agent's Signature, if changing Registered Agent:		I: 27	•
I hereby accept the appointment as registered agent and agree	e to act in this capacity. I fi	ırther agree to comply v	vi <b>th</b>

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 **Type of Action Title** Name 1 **Address** MON Leonal Rivas 1/25/Sw 245 St MAdd Homesterd, FL 33032 Remove Remove ∏Add Remove ∐Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated \_ Signature of a member or authorized representative of a member Carlos E. Falcon:
Typed or printed name of signee

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Filing Fee: \$25.00