2110000040899

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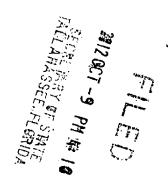
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EXAMINER



600240179766

10/09/12--01013--020 **25.00



COVER LETTER

1,1

TO:	Registration Se Division of Cor	ection rporations			
SUBJ	ECT:	T. ROBERT FINISH CARPENTRY LLC			
		Name of Lim			
The en	iclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.		
Please	return all correspo	ondence concerning this matte	r to the following:		
		RC	DBERTO J RISCHMAUI		-
			Name of Person		74
		ROBER	T FINISH CARPENTRY L	LC	12 80 T
			Firm/Company		Total L
7		724 NW 132 PLACE		PH WITH	
			Address		
			MIAMI, FL 33182		PAT F
			City/State and Zip Code		_
For fu	rthar information	E-mail address: concerning this matter, please	to be used for future annual report no	tification)	
roi iu	imer information (concerning this matter, prease	can,		
		TO M RISCHMAUI	at (_786_)	553-1260	
	Name (of Person	Area Code & Dayt	ime Telephone Numb	er
Enclo	sed is a check for t	the following amount:			
√ \$2	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclos	ed) Certifie	iting Fee, cate of Status & ed Copy onal copy is enclosed)
	Regist Divisi P.O. E	LING ADDRESS: tration Section on of Corporations Box 6327 tassee, FL 32314	STREET/COUR Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	orations Center Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ROBERT FINISH	CARPENTR	Y LLC	
(Name of the Limited Liability Com (A Florida Limite	pany as it now appe d Liability Company	ars on our records.)	
The Articles of Organization for this Limited Liability Compa	ny were filed on	APRIL 05, 2011	and assigned
Florida document numberL11000040899			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	ability company h	ere:	
The new name must be distinguishable and end with the words "Li	imited Liability Com	nany " the designation "I I	C" on the abbreviation
"L.L.C."	mined Diability Com	pany, the designation DE 学校 提供:	C of the appreviation
Enter new principal offices address, if applicable:			<u>8</u> 1
(Principal office address MUST BE A STREET ADDRESS)		55. 55.	ATEURON Distribution
	 	m-	7.7
		න න සිනි නැ ්	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered	office address on	our records, enter the	e name of the new
registered agent and/or the new registered office address h		our records, enter th	t manne of the new
Name of New Registered Agent:			
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·		
	E	Inter Florida street addre	?SS
	, 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member Title <u>Address</u> Type of Action <u>Name</u> ROBERTO M RISCHMAUI MGRM 724 N.W. 132 PLACE ✓ Add Remove MIAMI, FL 33182 ROBERTO J RISCHMAUI MGRM 724 N.W. 132 PLACE ☐ Add MIAMI, FL 33182 ✓ Remove ___ Add Remove Add Rem Remove 翠玉 **d** Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) OCTOBER 3 2012 Dated __ ignature of a member or authorized representative of a member ROBERTO JESUS RISCHMAUI Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00