(Red	questor's Name)			
(Add	tress)			
(Add	iress)			
. (City	//State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				

G. MCLEOD

MAY 1 9 2011

EXAMINER



100207641541

05/18/11--01024--004 **55.00

COVER LETTER

TO: Registration of	on Section Corporations			
SUBJECT:	OBM CON	STRUCTION, LLC		
		nited Liability Company		
The enclosed Article	es of Amendment and fee(s) are su	bmitted for filing.		
Please return all con	respondence concerning this matte	er to the following:		
		Heather Scott	· · · · · · · · · · · · · · · · · · ·	
		Name of Person		
	Rosenthal	n, LLC		
		Firm/Company		
	20900 NE 30th Avenue, Suite 600			
		Address	· · · · · · · · · · · · · · · · · · ·	
		Aventura, FL 33180		
		City/State and Zip Code		
	F-mail address:	has@rrrklaw.com (to be used for future annual report no	otification)	
For further informati	on concerning this matter, please			
	Heather Scott	at (305)	937-0300	
Na	me of Person		time Telephone Number	
Enclosed is a check f		√]\$55.00 Filing Fee &	\$60.00 Filing Fee,	
	Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Sed) Certified Copy (additional copy is enclosed)	
Rej Div P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 llahassee, FL 32314	STREET/COU Registration Sec Division of Corp Clifton Building 2661 Executive	porations 5	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OBM C	onstruction, LLC		
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appear	rs on our records.)	
(A Florida El	minica Elabinty Company)		
The Articles of Organization for this Limited Liability Co	ompany were filed on	5/16/11	and assigned
Florida document number L11000057576			
	∴		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ed liability company her	<u>e</u> :	
. LPT\	/entures, LLC		
The new name must be distinguishable and end with the word "L.L.C."	ls "Limited Liability Compa	ny," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRI	ESS)		AR A
	-		SE - CONTRACTOR
			<u>v, ≥</u> ∞
Enter new mailing address, if applicable:			
			95
(Mailing address MAY BE A POST OFFICE BOX)			08.05.
B. If amending the registered agent and/or registe	red office address on o	ur records, <u>enter</u>	the name of the new
registered agent and/or the new registered office addre	ess nere:		
N. CN. B. V. LA			
Name of New Registered Agent:			
New Registered Office Address:			
	Ent	er Florida street ad	ldress
		, 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

MGRM = Managing Member <u>Title</u> Name **Address** Type of Action ☐ Add Remove Remove ☐ Add ☐ Remove ☐ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Heather A. Scott, Authorized Representative Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00