L110000095499

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

T. HAMPTON
OCT 10 2011
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations							
SUBJE	:CT: <u>W</u>	AYNE	HENDE Name of Limi	RSON CONCRETE ted Liability Company	LLC		
The end	closed Articles of	Amendment a	and fee(s) are sub	omitted for filing.			
Please	return all correspon	ndence conce	rning this matter	to the following:			
			Way	ne Henderson Name of Person			
WMNE HENDERSON CONCRETE LLC Firm/Company							
	3803 (RYSTAL LAKE DR Address						
	CHIPLEY, FL 32428 City/State and Zip Code						
		E-mail address: (to be used for future annual report notification)					
For furt	her information co	oncerning this	s matter, please c	all:			
	Name of	Hende Person	<u> 1500</u>	at (<u>850)</u> 258 85 Area Code & Daytime T	elephone Number		
Enclose	d is a check for th	e following a	mount:				
\$25.	00 Filing Fee	\$30.00 F	Filing Fee & icate 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 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

FILED

2011 OCT -7 AM 11: 43

HENDERSON CONCRETE LACTERIARY OF STATE (Name of the Limited Liability Company as it now appears on our record). AHASSEE, FLORIDA (A Florida Limited Liability Company) Florida document number <u>L\\000095499</u>. This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent:

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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 **Type of Action** Title Title **Address** <u>Name</u> Henderson, Kristi J 2

Henderson, Wayne h. MGR **Z** Remove MGR 🔲 Add Remove Add Remove □Add Remove \Box Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Wynety/autor
Signature of a member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00