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SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

Division of Co			
SUBJECT:	Guaranteed Coa	ting & Contracting, LL	.C
		ted Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	oondence concerning this matter	to the following:	•
		Scott Levitt	·
		Name of Person	
	Guarantee	ed Coating & Contracting,	LLC
-		Firm/Company	
		2800 Gateway Dr	
		Address	······································
	Pomp	oano Beach, Forida 33069)
		City/State and Zip Code	
	Scott@	GuaranteedCoating.com to be used for future annual report no	tification)
For further information	concerning this matter, please of		
	Scott Levitt	at (561)	7023844
. Name	of Person	Area Code & Dayt	ime 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)
MAII	LING ADDRESS:	STREET/COIII	RIER ADDRESS:

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



October 17, 2012

SCOTT LEVITT 2800 GATEWAY DRIVE POMPANO BEACH, FL 33069

SUBJECT: GUARANTEED COATING & CONTRACTING, LLC

Ref. Number: L12000005209

We have received your document for GUARANTEED COATING & CONTRACTING, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete page 1 of the amendment form (attached).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 812A00025663

Leslie Sellers Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	JEFFREY AROUSON	2800 GATEHAY DR	Add
		POMPANO BEACH, FL 33069	Remove
			Add Remove
***************************************			Add Remove
			Add Remove
			Add Remove
			Add Remove

mending any	y other information, enter change(s) here: (Attach additional sheets, if necessary.)
	•
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	· · · · · · · · · · · · · · · · · · ·
, · · · · · · · · · · · · · · · · · · ·	Signature of a member or authorized representative of a member
	Touch Str 16-177. Typed or printed name of signee
	Typed or printed name of signee
	`

Page 3 of 2

Filing Fee: \$25.00