L120000233335

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SECRETARY OF STATE TALLAHASSEE, FLORING

APPROVED AND FILED

D. BRUCE

DEC 04 2012

EXAMINER

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

Archer Construction Services, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher Archer

Name of Person

Archer Construction Services, LLC

Firm/Company

1375 Brookmont Ave. E.

Address

Jacksonville, FL 32211

City/State and Zip Code

cgarcher01@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher Archer

904.728-8799

Name of Person

Area Code & Daytime 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)

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

12 PFC - 3 PM 3:

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(September 2	lability Company as it now a	ppears on our records.)
(AF	dability Company as it now a Plorida Limited Liability Compa	any)
The Articles of Organization for this Limited Lia	bility Company were filed or	2/17/12 and assigned
Florida document number L12000023325		
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability compan	y here:
5		*.
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability C	Company," the designation "LLC" on he abbreviation
Enter new principal offices address, if applical	ble:	HE C
(Principal office address MUST BE A STREET	ADDRESS)	FILED FILED SETARY OF S
	·····	TO TO
Enter new mailing address, if applicable:	38 38	
(Mailing address MAY BE A POST OFFICE B	<u> </u>	
	·	
B. If amending the registered agent and/or registered agent and/or the new registered offi		on our records, enter the name of the new
Name of New Registered Agent:	Geneva Archer	
New Registered Office Address:	1375 Brookmont Ave.	
		Enter Florida street address
	Jacksonville	Florida 32211 Zip Code
	City	Zip Code
New Registered Agent's Signature, if changing Re	gistered Agent:	
I hereby accept the appointment as registered	agent and agree to act in t	this capacity. I further agree to comply with cance of my duties, and I am familiar with and

If Changing Registered Agent, Signature of New Registered Agent

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

<u>Title</u>	Name	Address	Type of Action
MGRM	Christopher L Archer II	1375 Brookmont Ave. E. Jacksonville, FL 3221	1 Add
			Remove
MGRM	Geneva Archer	1375 Brookmont Ave. E. Jacksonville, FL 3221	
			Remove
			Add
			Remove
			12 DEC
			Bemow 7
			TE STATE
			Add
			-
			Add Remove

. If amending any other information, en	ter change(s) here: (Attach additional sheets, if necessary.)
November 27	2012
Chris IW.	h
Signature of	f a member or authorized representative of a member
Christopher Archer	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

SECRETARY OF STATE

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