# 112-00024121

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#### COVER LETTER

TO: Registration Section
Division of Corporations

**Bell Construction Company & Consulting, 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:

# **Gregory Bell**

Name of Person

Bell Construction Company & Consulting, LLC

Firm/Company

375 Gray Road

Address

Melbourne, FL 32904

City/State and Zip Code

g.bell@att.net

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

For further information concerning this matter, please call:

## **Gregory Bell**

Name of Person

\_321 \

508-6722

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

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

# BELL CONSTRUCTION COMPANY & CONSULTING, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liabi Florida document number L12000026121	ility Company were filed on 02/22/2012	and assigned
This amendment is submitted to amend the following	ing:	
A. If amending name, enter the new name of th	e limited liability company here:	
The new name must be distinguishable and end with the wor	ds "Limited Liability Company," the designation "LL	- 2
Enter new principal offices address, if applicabl	e:	
(Principal office address MUST BE A STREET A	ADDRESS)	
Enter new mailing address, if applicable:		72: 2
(Mailing address MAY BE A POST OFFICE BO	X)	\$7. J
B. If amending the registered agent and/or registered agent and/or the new registered office.  Name of New Registered Agent:	registered office address on our records e address here:	s, enter the name of the new
New Registered Office Address:		
	Enter Florida street addres	x
	. Flo	orida
<del>-</del>	City	orida Zip Code
New Registered Agent's Signature, if changing Regi	istered Agent:	
I hereby accept the appointment as registered a provisions of all statutes relative to the proper a accept the obligations of my position as register being filed to merely reflect a change in the regi- company has been notified in writing of this cha	and complete performance of my duties, an red agent as provided for in Chapter 605, a istered office address, I hereby confirm tha	nd I am familiar with and F.S. Or, if this document is

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	CURRY-BELL, DEBRA S.	375 GRAY ROAD	Add
		MELBOURNE, FL 32904	Remove
AMBR	CURRY-BELL, DEBRA S.	375 GRAY ROAD	<b>=</b> Add
		MELBOURNE, FL 32904	☐ Remove
MGRM	BELL, GREGORY KIRK	375 GRAY ROAD	SECREMENT SECREM
		MELBOURNE, FL 32904	Removes
AMBR	BELL, GREGORY KIRK	375 GRAY ROAD	1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1     1
		MELBOURNE, FL 32904	□ Remove
AMBR	MARTINEZ, MANUEL	10019 CHORLTON CIRCLE	 <b>■</b> Add
		ORLANDO, FL 32832	_□ Remove
AMBR	LOCOCO, DAVID	48 TENNESSEE AVENUE	 
	•	MERRITT ISLAND, FL 32953	_□ Remove

D.	If amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
E.	(The effective	date, if other than the date of filing:
	Dated	MARCH 19 2014
		Many lotece
		SignAure of Anember of Mulhorized representative of a member  GREGORY KIRK BELL
		Typed or printed name of signee

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Filing Fee: \$25.00

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