L120000 42813

(Re	questor's Name)	
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(Do	cument Number)	
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TALL THE FACE OF STATE

DEC - 9 2013



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 19, 2013

ANDREW LIUTKUS 521 104TH AVE N. NAPLES, FL 34108

SUBJECT: AML CONSTRUCTION AND INSPECTION SERVICES, LLC.

Ref. Number: L12000042873

We have received your document for AML CONSTRUCTION AND INSPECTION SERVICES, 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):

The name designated in your document is unavailable since it is the same as or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

The document number of the name conflict is L0400007394.

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.

Tammi Cline Regulatory Specialist II

Letter Number: 213A00026730

COVER LETTER

Division of Corporations SUBJECT: AML CONSTRUCTION AND TNSPECTION SERVICES, LLC. Name of Limited Liability Company
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:
ANDREW M. LIUTKUS Name of Person
AML CONSTRUCTION AND INSPECTION SERVICES, LLC.
Firm/Company
521 104世 AVE. N. Address 日 日 日 日 日 日 日 日 日 日 日 日 日 日 日 日 日 日
NAPLES, FLORIDA. 34108
City/State and Zip Code OBPLESCIPTION OF THE TOTAL CONTROLLING TH
For further information concerning this matter, please call:
ANDREW LIUTKUS at (239) 273-9656
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:

□\$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

\$30.00 Filing Fee &

Certificate of Status

□ \$25.00 Filing Fee

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

STREET/COURIER ADDRESS:

□\$60.00 Filing Fee,

Certified Copy

Certificate of Status &

(additional copy is enclosed)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AML CONSTRUCTION AND INSPECTION SERVICES, 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 Liability	Company were filed on MARCH	26, 2012 and assigned		
Florida document number <u>L 12000042873</u>	·			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin				
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Company," th	e designation "LLC" or the abbreviation		
	411			
Enter new principal offices address, if applicable:	NA			
<u>(Principal office address MUST BE A STREET ADL</u>	RESS)			
		0 1		
Enter new mailing address, if applicable:	NA			
(Mailing address MAY BE A POST OFFICE BOX)	AB	<u> </u>		
Mauing address WAY BE A POST OF FICE BOX)				
B. If amending the registered agent and/or registered agent and/or the new registered office ad Name of New Registered Agent:	d <u>ress here</u> :	cords, enter the name of the new		
Nov. Danistand Office Address.				
New Registered Office Address:	Enter Florida street address			
		, 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 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>	<u>Name</u>	Address <u>T</u>	ype of Action
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amending any otl	ner information,	, enter change(s) her	e: (Attach additional sheets, if necesso	ary.)
				
DECEMBER	, 2			
	//5			
	Signatur	re of a member or author	orized representative of a member	
λ.	_	1. LIUTKUS		
	NUEW !	Typed or printe	d name of signee	

Page 3 of 3

Filing Fee: \$25.00

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