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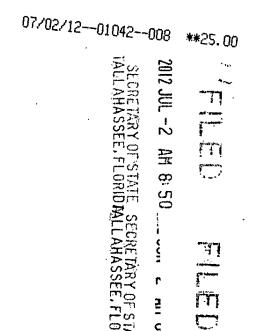
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J. SAULSBERRY EXAMINER

JUL 5 2012

COVER LETTER

Division of Corporations		
SUBJECT: June Hang Bulders 957 LLC Hame 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:		
Gary Dietmeyer Name of Person	-	
Turn Key Builders, PSJ LLC Firm/Company	- \$100 }	
307 Beacon Rond Address	ECRETAR)	TI FI
PORT ST JOE F1. 32456 City/State and Zip Code	CE, FLE	
<u>Schetneyer</u> & hotnal com E-mail address: (to be used for future annual report notification)	ATE	
For further information concerning this matter, please call:	20 17.81 81	
Sous Detrock at (970) 250-4405 Name of Person Area Code & Daytime Telephone Number	-2 SEE.	
Enclosed is a check for the following amount:	AH 8: FLOR	1 77
Certificate of Status Certified Copy Certific	cate of Status & ced Copy	
(additio	onal copy is enclo	osed)

MAILING ADDRESS:

TO:

Registration Section

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

_ TURN Key Buil	ders PSI	i LLC		
(<u>Name of the Limited L</u> (A F	iability Company as lorida Limited Liabilit	it now appears on our record y Company)	<u>s.</u>)	
The Articles of Organization for this Limited Liab	pility Company were	filed on $4/12/1$	2 and a	nssigned
Florida document number <u>L\20000 SC</u>	0047.			
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	he limited liability o	company here:		
N/A				
The new name must be distinguishable and end with "L.L.C."	the words "Limited Li	ability Company," the designa	tion "LLC" or th	e abbreviation
Enter new principal offices address, if applicab	ole:	N/A	<u> </u>	•••
(Principal office address MUST BE A STREET ADDRESS)				_
	-		TAR A\$SI	
Enter new mailing address, if applicable:		_ N/A	OF S	[I]
(Mailing address MAY BE A POST OFFICE Bo	<u> </u>		TATE ORIDA	
D. If amonding the projectived agent and/over		adduran on our moondo		of the new
B. If amending the registered agent and/or registered agent and/or the new registered office		dadress on our records, <u>e</u>	ILLE ECR	of the new
Name of New Registered Agent:	N/A		UL -2 HASSE	To return
New Registered Office Address:			E P	<u>.m.</u>
		Enter Florida stre	et bijdhess co	
		, Flori	da ^{>} •	
	Cit	ν	Zip Co	ode

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 **Title** Name **Address Type of Action** MGRM Remove 32456 ☐ Add Remove ☐ Add Remove T Add Remove ∐Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) Signature of a member or authorized representative of a member

Page 2 of 2

Gary J Dietmeyer
Typed or printed name of signee

Filing Fee: \$25.00