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## **COVER LETTER**

Division of Corporations
SUBJECT: RGB Construction Management 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:
ROBERT G. BOTTS  Name of Person
RGB Construction Management LLC
566 Coronado Place Address
Parama City Beach FLORIDA 32413 City/State and Zip Code
F-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Robert G. Botts at (850) 890-9881  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \\$30.00 Filing Fee & Certificate of Status \$\Bigcup \\$55.00 Filing Fee & Certificate of Status \$\Bigcup \\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

KGB Con	STRUCTION MANAGEMENT LL	
( <u>Name of the Limited</u> (A	Liability Company as it now appears on our records.)  Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab	bility Company were filed on05/02/2	2012 and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here:	
The new name must be distinguishable and contain the wor	rds "Limited Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicat	ble:	
Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B	<u> </u>	
		9
B. If amending the registered agent and/or registered agent and/or the new registered offi		enter the name of the new
registered agent and/or the new registered our	ce address nere.	<u> </u>
Name of New Registered Agent:		F 3
Name of New Registered Agent.		© <del>1</del> 1
New Registered Office Address:	Enter Florida street address	
	, Flori	ida Zip Code
	<del>y</del>	•

## 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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager .

AMBR = Authorized Member <u>Title</u> **Name** <u>Address</u> Type of Action MGR Phillip S. MANTEON 7929 Shady Grove Road gradd
GRAND Ridge FLORIDA Rem
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Typed or printed name of signee

Filing Fee: \$25.00