# L/2000065357

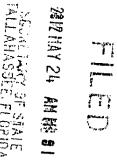
(Requestor's Name)				
(Address)				
· (Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
A. LUNT				
MAY <b>25</b> 2011				
EXAMINER				

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## **COVER LETTER**

то:	Registration S Division of Co			
SUBJECT: ALAN TEMPLE			INSTALLATIONS LLC	
3013)	<u> </u>		ited Liability Company	<b></b>
The en	closed Articles of	Amendment and fee(s) are sul	bmitted for filing.	
Please	return all corresp	ondence concerning this matter	r to the following:	
			ALAN TEMPLE	
			Name of Person	
		•	•	
		ALAN T	EMPLE INSTALLATIONS LLC	AN AND AN
			Firm/Company	
		4	OFAE DEED LAVE DD	2 1
			9545 DEER LAKE RD Address	
Address				
<del></del>			LUTZ FL 33548	TO 3
			City/State and Zip Code	<u> </u>
			altpafl@hotmail.com	
		E-mail address: (	(to be used for future annual report notification)	
For fu	rther information	concerning this matter, please	call:	
	AL	AN TEMPLE	at ( 813 ) 909-2464	
	Name	of Person	Area Code & Daytime Telephone Nur	mber
		the following amount:		
<b>₹</b> \$2.	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy Certi (additional copy is enclosed) Certi	Filing Fee, ificate of Status & ified Copy itional copy is enclosed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		tration Section ion of Corporations Box 6327	STREET/COURIER ADDRESS Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	S:

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

# 

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Finter FI	orida street address
	Ditti I i	. Florida
<del></del>	City	Zin Code

### New Registered Agent's Signature, if changing Registered Agent:

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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 Changing Registered Agent, Signature of New Registered Agent

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> <u>Address</u> **Type of Action** MGR **ALAN TEMPLE** 19545 DEER LAKE RD **✓** Add LUTZ FL 33548 Remove ☐ Add ☐ Remove ☐ Add ☐ Remove Remove  $\square$ Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 05/21/2012 Dated Signature of a member or authorized representative of a member **ALAN TEMPLE** 

Typed or printed name of signee

Page 2 of 2 Filing Fee: \$25.00