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SECRETARY OF STATE
ALLAHASSEE, FLORIN

D. BRUCE

MAY 3 0 2012

EXAMINER

COVER LETTER

TO:	Registration S Division of Co			
SUBJI	CCT:	LUMBRA CO	DNSTRUCTION LLC	
00101			ited Liability Company	
The en	closed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please	return all corresp	ondence concerning this matte	r to the following:	
			ERIC J LUMBRA	
			Name of Person	
LUMBRA CONSTRUCTION LLC				
			Firm/Company	
2359 MOONSTONE AVE				
			Address	12
			DELTONA FL 32738	HAY 29 CRETAR LAHASS
	City/State and Zip Code		AY 29 PM 5 HASSEE, FL	
		Carallada	dhmark@cfl.rr.com to be used for future annual report notification	E P B
For fur	ther information	concerning this matter, please	·	F STATE FLORIDA
	D	iane P Mark	at (386) 748	≯ 3-0306
	Name	of Person	Area Code & Daytime Tel	ephone Number
Enclose	ed is a check for t	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)
	Regist Divisio P.O. B	JING ADDRESS: ration Section on of Corporations sox 6327 assee, FL 32314	STREET/COURIER A Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns .

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LUMBRA (Name of the Limited Lightli	CONSTRUCTION L	LC		_	
(<u>Name of the Limited Liabili</u> (A Florida	a Limited Liability Company)	irs on our records.			
The Articles of Organization for this Limited Liability Florida document number	Company were filed on	MAY 17, 2012	and	l assig	ned
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the lin	mited liability company he	<u>re</u> :			
LUMBR	A CARPENTRY LLC				
The new name must be distinguishable and end with the we'L.L.C."	ords "Limited Liability Comp	any," the designation '	'LLC" or	the abl	oreviation
Enter new principal offices address, if applicable:	##1		In		
(Principal office address MUST BE A STREET ADD	ORESS)			₹ -	N-M-
			ĦĨ.	>>> -≺	P
			3SE SSE	39	
Enter new mailing address, if applicable:			<u> </u>	20	
(Mailing address MAY BE A POST OFFICE BOX)	_		STATE	ည်	O
			35	ണ	
B. If amending the registered agent and/or registered agent and/or the new registered office adented agent and/or the new registered office adented Name of New Registered Agent: New Registered Office Address:	dress here:	our records, <u>enter</u> nter Florida street ad , Florida		ne of	the nev
	City	, 1 loi loa	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 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 Type of Action **Title Name Address** Remove Remove ___ Add ☐ Remove ☐ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) MAY 25 Dated ___ Signature of a member or authorized representative of a member **ERIC J LUMBRA** Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00