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SECRETARY OF STATE TALL AHASSEE, FLORID.

D. BRUCE

JUL 13 2012

**EXAMINER** 

## **COVER LETTER**

Division of C	Corporations		•	
SUBJECT:	Armon const	truction Services L	LC .	
	Name of Lin	nited Liability Company		
The enclosed Articles	of Amendment and fee(s) are so	ubmitted for filing.		
Please return all corre	spondence concerning this matte	er to the following:		
		Robabeh M. Zonouzi	·	
		Name of Person		
	Armon	Consreuction Service	es LLC	
		Firm/Company		·
		5541 Moon Lake Roa	d	
	· .	Address		
		Groveland, FL, 34736	3	
	• • • • • • • •	City/State and Zip Code		
	E-mail address:	n_construction@yahoo (to be used for future annual re	oct notification)	7
For further informatio	n concerning this matter, please			12 JUL SECRET
Rob	oabeh M. Zonouzi	at ( 352 )	348-7975	FILL FILL FILL FILL FILL FILL FILL FILL
Nam	e of Person	Area Code &	Daytime Telephone Number	NO LED PM 4: COF STA EE. FLOR
Enclosed is a check for	or the following amount:			7417 1417 1417 15
<b>≥</b> \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is	\$60.00 Filing F Certificate of enclosed) Certified Cop (additional co	Status &

### 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

	n construction Services		
( <u>Name of the Limited</u> (A	Liability Company as it now appe Florida Limited Liability Company	ars on our records.)	
The Articles of Organization for this Limited L	iability Company were filed on	07/09/2012	and assigned
Florida document numberL12000089	9008		
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	f the limited liability company h	ere:	
Armon construction Servi	ces LLC		
The new name must be distinguishable and end wit "L.L.C."	th the words "Limited Liability Com	pany," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applic			
(Principal office address MUST BE A STREE	ET ADDRESS)		
	NT	·	SEC 3
.ar €	<b>₩</b>	r F	ARR JE
Enter new mailing address, if applicable:		·	SA - T
(Mailing address MAY BE A POST OFFICE	BOX)		MY WILL
	•		
B. If amending the registered agent and/ registered agent and/or the new registered of		our records, enter t	he name of the new
Name of New Registered Agent:	Robabeh M. Zonouzi		
New Registered Office Address:	5541 Moon Lake Road		
	·	Enter Florida street add	ress
	· Groveland	, Florida	34736
	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 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> **Type of Action** Name **Address MGRM** Robabeh M. Zounouzi 5541 Moon Lake Road, Groveland, ✓ Add Florida\_34736\_\_\_\_\_ Remove ☐ Add ☐ Remove ☐ Add Remove  $\bigcap$  Add Remove  $\square$ Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Page 2 of 2

July 12

Filing Fee: \$25.00

APPROVEL AND FILED