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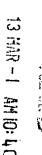
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COVER LETTER

TO:

Clifton Building

CR2E079 (5/06)

2661 Executive Center Circle

Tallahassee, Florida 32301

Registration Section Division of Corporations

Rock Solid Custom Builders LLC
(Name of Limited Liability Company) The enclosed member, managing member or manager resignation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: Thad Szkudlarek
(Contact Person) Rock Solid Custom Builders UC

(Firm/Company)

9967 SE SS44 Ave, Unit 2

(Address) Belleview, FL 34420 For further information concerning this matter, please call: Thad Szkudlarek at (352) 245-2476 (Area Code & Daytime Telephone Number) Enclosed please find a check made payable to the Florida Department of State for: \$55 Filing Fee & ■ \$25 Filing Fee Certified Copy STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations** Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Rock Solid C	uston Builder bility Company as it now appears or rida Limited Liability Company)	S LLC	
(<u>Name of the Limited Lial</u> (A Flo	bility Company as it now appears or rida Limited Liability Company)	n our records.)	
The Articles of Organization for this Limited Eiabil Florida document number	ity Company were filed on <u>Avo</u>	9 29, 20/2 a	nd assigned
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	e limited liability company here:		
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company."	"the designation "LLC"	or the abbreviation
Enter new principal offices address, if applicable	e: 		ယ <u>အ</u>
(Principal office address MUST BE A STREET A	DDRESS)	0 6 1 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7	
Enter new mailing address, if applicable:		برج مرح ر محودات	; 5 0
(Mailing address MAY BE A POST OFFICE BOX	<u>x</u> ,	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	5
B. If amending the registered agent and/or registered agent and/or the new registered office	address here:		
Name of New Registered Agent:	Thad Szku	dlarek	
New Registered Office Address:	Thad Szkus 9967 SE 58 Enter Belleview City	Florida street address	it 2
	Rollovia	norther street dearess	24420
_	City	, Florida <i>Zi</i> ,	p Code
New Registered Agent's Signature, if changing Regi			

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. Thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Robintered Agent, Signature of New Registered Agent

Page 1 of 3

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member Type of Action <u>Title</u> <u>Name</u> <u>Address</u> Remove Remove Remove

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
	Please remove Monica Centonze as both	
	an Officer (Secretary) and registered agent She is not associated with the	
	agent She is not associated with the	
	Company any longer.	
	Foh 27 -200	
Dated	700 27	
Signature of a phemoer of authorized representative of a member		
	Thad Szkudlarek	
	Typed or printed name of signee	
	Page 3 of 3	

Filing Fee: \$25.00