L12000142095

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2013 APR 24 AM II: 10 SECRETARY THE STATE ANA SSEE, FLORIDA

COVER LETTER

TO:

Registration Section

Division of Corporations

SUBJECT:

Kruse Drywall, Stucco and Remodeling 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:

Lee Kruse

Name of Person

Kruse Drywall, Stucco and Remodeling LLC

Firm/Company

4509 102nd St. W.

Address

Bradenton, Florida 34210

City/State and Zip Code

Lisamomoffour@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lee Kruse

941 465-2805

Area Code & Daytime Telephone Numbe

Enclosed is a check for the following amount:

Name of Person

\$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)

FILED MIIII

MAILING ADDRESS:

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**

KRUSE DRYWALL, STUCCO AND REMODELING LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on 11/08/2012 and assigned
Florida document number L12000142095	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and end with the words "Limi" L.L.C."	ted Liability Company," the designation "LLC" of the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida
	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> <u>Name</u> **Address Type of Action Christopher Nall** 5620 41st St E **MGRM** Bradenton, FL 34203 Remove Add Remove

If amending any other informati	on, enter change(s) here: (Att	tach additional sheets, if necessary.)
•		
April 18	2013	2
d/1911 10		
		Mount
Signa	ture of a member or authorized r	epresentative of a member
Lee Kruse		
	Typed or printed name	of signee

Page 3 of 3

Filing Fee: \$25.00

