L13000017174

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phon	e #)
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SECRETARY OF STATE DIVISION OF CORPORATIONS

APR - 1 2013

T. HAMPTON

COVER LETTER

TO:

Registration Section Division of Corporations

SURJECT

Tarpon Bay Construction, 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:

Scott M. Alexander

Name of Person

Bouldin & Associates, P.A.

Firm/Company

6424 Central Avenue

Address

St. Petersburg, FL 33707

City/State and Zip Code

scottmalexanderpa@gmail.com

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

For further information concerning this matter, please call:

Scott M. Alexander

727 6122212

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for 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)

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

Tarpon Bay Construction,			
(Name of the Limited	Liability Compa	ny as it now appears on our recor liability Company)	<u>ds.</u>)
(4	A Florida Limited I	Liability Company)	
The Articles of Organization for this Limited I. Florida document number L13000017174	iability Company	were filed on 02/04/2013	and assignment
This amendment is submitted to amend the follow. A. If amending name, enter the new name of	_	pility company here:	FILEU STATE ARY OF STATE SE CORPORATIONS
The new name must be distinguishable and end w "L.L.C."	ith the words "Lim	ited Liability Company," the design	ation "LLC" or the abbreviation
Enter new principal offices address, if appli-	rahle:	5721 Dunfries Street No	orth
(Principal office address MUST BE A STREE		St. Petersburg, Florida 3	33709
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		5721 Dunfries Street No St. Petersburg, Florida 3	
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:			enter the name of the new
New Registered Office Address:			
-		Enter Florida str	eet address
		, Flor	rida
		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 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

<u>Title</u>	<u>Name</u>	Address	ype of Action
MGRM	Todd Alexander	5440 64th Street North	Add
		St. Petersburg, FL 33709	Remove
MGRM	Jason Gingras	9122 Lakewood Drive	Add
		Seminole, FL 33772	Remove
MGRM	Scott Alexander	5721 Dunfries Street North	Add
		St. Petersburg, FL 33709	Remove
			Add f
			SERETARY DIVISION OF CO.
			RY OF STATE CORPORATE
			Remove
			Add
			Remove

	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<u>IN</u>	/A
	<u>-</u>
ated Ma	rch 27 2013
ateu	2000
	Signature of a member or authorized representative of a member
	Todd J. Alexander
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

DIVISION OF CORPORATIONS