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(Re	equestor's Name)	1
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M. MILLIGAN EXAMINER

MAR 2 5 2014

TO: Michelle FAX # 1-(850)245-6030

FROM: SARAH CONNER @ Roy L. PAHERSON, JR Concrete, LLC FAX# 1(251) 321-0068

TiME: 9:46 DATE 3/21/14 PH # (850) 516-2167 Cell

RECEIVED
14 MAR 25 AM II: 45

COVER LETTER

TO. Registration Section Division of Corporations

Roy L. Patterson Jr. concrete 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:

Sarah Conner

Name of Person

Roy L. Patterson Jr. Concrete LLC

123 Dogwood Place

Atmore Alabama 36502

City/State and Zip Code

reddpatterson2121@gmail.com

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

For further information concerning this matter, please call:

Sarah Conner

at (850) 516-2167

Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount:

\$25.00 Filing Fee

@ \$30.00 Fiting 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

Roy L. Patterson Jr. Concrete LLC

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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JAC.	in to the second

Zip Code

(A Flor	ida Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number 113000017787	Company were filed on 2/14/14 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the li	mited liability company here:
The new name must be distinguishable and end with the words "	Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
<u>(Principal office address MUST BE A STREET ADI</u>	DRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad	ristered office address on our records, <u>enter the name of the na</u> idress here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida

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 605, 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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	James L. Patterson	329 Montgomery Street	■ Add
		Atmore, Alabama	
		36502	
AMBR	Monya T. Johnson	6398 Jahaza Road	CI Add
		Molino Florida	Remove
		32577	a Remove
			🖸 Add
			🗆 Remove
			_
			D Add
			Remove
>			
			🗖 Add
			Remove
			_
			Add
			_D Remove

D.	If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	Effective date, if other than the date of filing:
	Dated 3/21/14
	Rose Potalon du
	Signature of a member or authorized representative of a member
	Roy L. Paterson Jr.
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00