

L13000036620

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(City/State/Zip/Phone #)

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2013 JUN 27 PM 12:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUN 28 2013

J. BRYAN

**COVER LETTER**

TO: **Registration Section  
Division of Corporations**

SUBJECT: PCB Restoration LLC  
Name of Limited Liability Company

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sharri Roberts  
Name of Person

PCB Restoration LLC  
Firm/Company

103 Amar Place Suite 104  
Address

Panama City Beach, FL 32413  
City/State and Zip Code

sharri.roberts@mail.rainbowintl.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sharri Roberts at (850) 251-8937  
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

PCB Restoration LLC

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

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TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

The Articles of Organization for this Limited Liability Company were filed on 3/11/13 and assigned  
Florida document number L13000034620.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited 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:

(Principal office address MUST BE A STREET ADDRESS)

103 Amar Place, Suite 104  
Panama City Beach, FL 32413

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

103 Amar Place, Suite 104  
Panama City Beach, FL 32413

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Sharri Roberts

New Registered Office Address:

5 Blue Crab Lane

Enter Florida street address

Panama City Beach Florida 32413

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.

Sharri Roberts

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  
MGR/M = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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Dated June 21, 2013

Sharri Robert

Signature of a member or authorized representative of a member

Sharri Roberts

Typed or printed name of signer

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Filing Fee: \$25.00

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