L13000061217

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COVER LETTER

TO:

Registration Section Division of Corporations

Subject. Celebration Demolition Services, 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:

Vince Edge

Name of Persor

Johnston, Hinesley, Flowers, Clenney & Turner, PC

Firm/Company

Post Office Box 2246

Address

Dothan, Alabama 36303

City/State and Zip Code

vedge@jhfc-law.com

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

For further information concerning this matter, please call:

Vince Edge

₃₇334₃793-1115

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

alabantian Damalitian Camilaga, I.I.C

Celebration Demoittion Serv		
(Name of the Limited L	iability Company as it now appears on our record lorida Limited Liability Company)	<u>s.</u>)
(A F	forida Limited Liability Company)	
The Articles of Organization for this Limited Liab	oility Company were filed on April 26, 2013	and assigned
Florida document number L13000061217		HIT Y
This amendment is submitted to amend the follow	ving:	P. OFFIGER
A. If amending name, enter the new name of t	he limited liability company here:	RIGA
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company," the designate	tion "LLC" or the abbreviation
Enter new principal offices address, if applicab	ole:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	2X)	
The state of the s		
		·
B. If amending the registered agent and/or		nter the name of the new
registered agent and/or the new registered office	ce address here:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	et address
	. Floric	da
	City	Zin 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

Title	<u>Name</u>	Address	Type of Action
MGR	Kenneth E. Lee	Post Office Box 470644	Add
		Celebration, FL 34747	Remove
			Add Remove
			Add Remove
			_ Add Remove
			Add Remove
<u></u>			Add Remove

D. If amending any other info	er information, enter change(s) here: (Attach additional sheets, if neces.	
·····		
		····
		<u></u>
Dated May 2,	2013	
Jated		
	James Market	
_	Signature of a member or authorized representative of a member	r
James Mark	Dunning, Manager	
	Typed or printed name of signee	· · · ·

Page 3 of 3

Filing Fee: \$25.00