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COVER LETTER

Division of Cor			
SUBJECT: PHE	Ilis Concrete,	LLC	
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	. 2
Please return all correspondence	ondence concerning this matter	to the following:	PILED 2013 JUL 12 PM 1:16 SECRETARY OF STATE TALLAHASSEE, FLORIO
	Paul Ellis		HASSE IN
	-	Name of Person	THE REPORT OF THE PERSON OF TH
	PH Ellis Cor	rcrete, LLC	FLORES :
		Firm/Company	
	97 Snapper	Street	ŕ
•		Address	
	Santa Rosa	Beach, FL 32459)
		City/State and Zip Code	
	E-mail address: (1	to be used for future annual report notificati	on)
For further information c	oncerning this matter, please c		,
Name o	f Person	at ()Area Code & Daytime Te	elenhone Number
		2000 00 200, 20	A-phono - value -
Enclosed is a check for the	he 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

PH Ellis Concrete, LLC				
(<u>Name of the Limited L</u> (A F	iability Company as it now appears (lorida Limited Liability Company)	on our records.)		
The Articles of Organization for this Limited Lial Florida document number <u>L13000067288</u>	· · · · · · · · · · · · · · · · · · ·	8/2013 and assigned		
This amendment is submitted to amend the follow		FILE PARTASSET TALLAHASSET		
A. If amending name, enter the new name of t	he limited liability company here:	SEC P		
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Company	," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applical	ble:			
(Principal office address MUST BE A STREET	ADDRESS)			
	 			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE B	<u>ox</u>)			
B. If amending the registered agent and/or registered agent and/or the new registered offi	~	r records, enter the name of the new		
Name of New Registered Agent:	Brad Congleton be CPA, In	С.		
New Registered Office Address:	50 Uptown Grayton Circle #15			
	Enter Florida street address			
	Santa Rosa Beach	, Florida <u>32459</u>		
	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

Page 1 of 3

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 **Address Type of Action Title** <u>Name</u> **Heather Anders** 97 Snapper Street **MGRM** Santa Rosa Beach, FL 32459 Remove Remove Remove

D. If amer	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
_		
_		
_		
_	ES.	富工
Dated	7-3-13	N SO
	Signature of a member or authorized representative of a member	10 3 C
	Typed or printed name of signee	聖山
	Page 3 of 3	P
	Filing Fee: \$25.00	