## 13000071052

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SEUKE FANT OF STREET

JUL' 9 2013

T. HAMPTON

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: A 1 A Builders, 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:
ROBERT PALMIERE
Name of Person .
A1A BUILDERS, LLC
• •
925. S. Congress Are.  Address
<u>.</u>
LELRAY BEACH, FL 33445
Leleay BEACH, FL 33445  City/State and Zip Code  Florida storm depot Dhotmail. com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
ROBERT PALMIERE at (561) 376-8495  Name of Person Area Code & Daytime Telephone Number
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status  Certificate of Status  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

	LDERS, LLC	
( <u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on orda Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liabil Florida document number	lity Company were filed on 5/ 71052	and assigned $\vec{\omega} = \frac{15}{2} \sqrt{3}$
This amendment is submitted to amend the following	ng:	JUL -
A. If amending name, enter the new name of the	e limited liability company here:	8 #1 8 CO.
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company," t	he designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	e:	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u> </u>	
B. If amending the registered agent and/or r registered agent and/or the new registered office		ecords, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Fl	orida street address
-		, Florida
	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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>		Address	Type of Action
MGRM	JUAN	VASQUEZ	925. S. Congress Ave	Add
			925. S. Congress Ave DelRAY BEACH, FL 334	45 Remove
	***			Add
				Remove
				Add Sign
				Remove 8 CONTE
				AH10:5
	<del></del>			Add Remove
				Keniove
				Add
				Remove
				_
				Add
				Remove
				_

, , ,	formation, enter change(s) here: (Attach additional sheets, if necessary.
July 3m	. 2013
1	
	Signature of a member or authorized representative of a member
	ROBERT PALMIERE
	Typed or printed name of signee
	Page 3 of 3 Filing Fee: \$25.00

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