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Office Use Only



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B. BOSTICK OCT **2 9** 2013

EXAMINER

COVER LETTER

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Division of Corporations
SUBJECT: RDM Hardyman 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:
Robert MElusky Name of Person
RDM Hardyman Services LLC Firm/Company
13003 County line Rd 10t 199
Spring Hill, FL 31409 City/State and Zip Code
E-mail address! (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee U\$30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section

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

RTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

R M Han	ty Company as it now appears on our records.) Limited Liability Company)	
(A Florida	Limited Liability Company)	
The Articles of Organization for this Limited Liability		
Florida document number <u>L130008219</u>	18.	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and end with the we "L.L.C."	ords "Limited Liability Company," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office ad	stered office address on our records, enter the name of the new dress here:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida 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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

: :

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGB.	Robert mcClusky	1302-3 Countyline Rd-141	≆ ☐ Add
Title of	ge only	SpringHill Fl 34609	Remove
· MGRM	Robert McClusky	13003 Causty line Rd lot1	Add Add
:	·	SpringHill, FZ 34609	Remove
mar.	James Bour	13023 County line Rd ld	
		Spring Hill FL 34609	Remove
MAR	William Michael Mills	13003 Countyline Rd Pot	***
•		Springthin FL 34609	Remove
MGR	Chris Garofalo	13063 County line Act 6	
. . :		SpringHill FL 34609	Remove
~MGR	Michael Bryan	190263 Caushyline Rol 1811	— ∰
· : :		3 pring Hill, FL 3460°	Remove

, '	
D. If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	Change title only for Robert McClisky From MGR to managing/member
	remove James Brown & milliam Mills
Dated	Add Chris Garofab 4 michael Bryan as mark
	Signature of a member or authorized representative of a member
	Typed or printed name of signee
	Page 3 of 3
	Filing Fac: \$25.00

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