# 13000100 le(01

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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C. GOLDEN

FEB - 4 2020

## **COVER LETTER**

| Division of Corporations   |  |
|--|--|
| SUBJECT: North (rest Construction, LLC Name of Limited Liability Company                               | · <u>·····</u>   |
| The enclosed Articles of Amendment and fee(s) are submitted for filing.                                |  |
| Please return all correspondence concerning this matter to the following:                              |  |
| Scott Langlais Name of Person  |  |
| North Crest Construction   | LLC  |
| 4577 Charing Cross K   | <u>d</u>   |
| Sarasota, FL 34241 City/State and Zip Code   |  |
| ncc sota@gmail. (c   | on)  |
| For further information concerning this matter, please call:   |  |
| Scott Langlais at (941) 504-5  Name of Person Daytime Tel  | 617<br>Lephone Number  |
| Enclosed is a check for the following amount:  |  |
| S25.00 Filing Fee Scrifficate of Status S55.00 Filing Fee Scriffied Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy tadditional copy is enclosed. |
|  |  |

TO:

Registration Section

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| North Crest Con  (Name of the Limited Liability Companion (A Florida Limited L   | STRUCTION LLC  Ny as it now appears on our records.)  Liability Company)                                    |
|--|---|
| The Articles of Organization for this Limited Liability Company Florida document number <u>L 13000/00667</u> .   |   |
| This amendment is submitted to amend the following:  |   |
| A. If amending name, enter the new name of the limited liabi   | ility company here:   |
| The new name must be distinguishable and contain the words "Limited Liabile Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS) | ity Company," the designation "LLC" or the abbreviation "L.L.C."  4577 Chasing Cross Rd  Sasasota, FL 34241 |
| Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  | 4577 Charing Cross Rd<br>Sarasota, FL 34241   |
| B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:  | address on our records, <u>enter the name of the new registered</u>   |
| Name of New Registered Agent:  New Registered Office Address:  |   |
|  | Enter Florida street address  |

### 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 605, 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.

City

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u>  | Address                | Type of Action |
|--------------|--------------|------------------------|----------------|
| AM.BR        | Michael Kent | 4001 Beneva Rd Unit 35 |                |
|              |              | Sarasota, FL 34233     | Remove         |
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| <i>y.</i> 11 an        | nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)  |
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| <u>Note</u>            | tive date, if other than the date of filing:  |
| f the rece<br>ecord is | ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed. |
| Date                   | 27th December 2019<br>Scott Linglais  |
|                        | Signature of a member or authorized representative of a member  |
|                        | Scott Langlais  |
|                        | Typed or printed name of signee   |

Filing Fee: \$25.00