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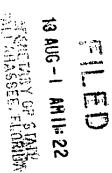
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COVER LETTER

·TO:

Registration Section
Division of Corporations

SUBJECT

Repair Maintance 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:

Nevelle Rowe

Name of Person

Repair Maintance LLc

Firm/Company

6066 Wedgewood Circle

Address

Orlando FL 32808

City/State and Zip Code

sherlynleonard@bellsouth.net

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

For further information concerning this matter, please call:

Nevelle Rowe

321,228-6243

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

2\$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

Repair Maintance LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 07/23/2013 Florida document number <u>L13</u>000104487 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Repair Maintenance LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." N/A Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) N/A Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: N/A Name of New Registered Agent:

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

City

N/A

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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 N/A N/A N/A Add Remove Remove Remove Add Remove Add Remove

N/A	n, enter change(s) here: (Attach additional sheets, if necessary.)
14/74	
July 29th	2013
& Neil	Rowe
Signat	ure of a member or authorized representative of a member
Nevelle Rowe	
	Typed or printed name of signee

Typed or printed name of si

Page 3 of 3

Filing Fee: \$25.00