

U30005794

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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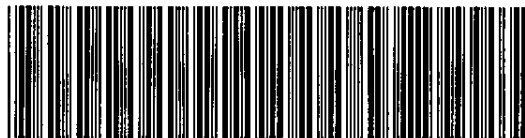
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

JAN 23 2015
D. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: COMPLETE CONSTRUCTION SYSTEMS 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 MARK BRYANT

Name of Person

COMPLETE CONSTRUCTION SYSTEMS LLC

Firm/Company

116 S. COATES ST. APT. #5

Address

DAYTONA BEACH, FL. 32118

City/State and Zip Code

COOL 1945 @ Hotmail.com

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

For further information concerning this matter, please call:

ROBERT M. BRYANT

Name of Person

at (386)

Area Code

871-3217

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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SECRETARY OF STATE

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

COMPLETE CONSTRUCTION SYSTEMS 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 July 26, 2013 and assigned Florida document number L13000105799.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

BRYANT PLUMBING LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

116 S. COATES ST. APT. 5
DAYTONA BEACH, FL.
32118

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

116 S. COATES ST. APT. 5
DAYTONA BEACH, FL.
32118

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:

Name of New Registered Agent:

ROBERT MARK BRYANT

New Registered Office Address:

116 S. COATES ST. APT. 5
Enter Florida street address
DAYTONA BEACH, Florida
City

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.

Robert M. Bryant
If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

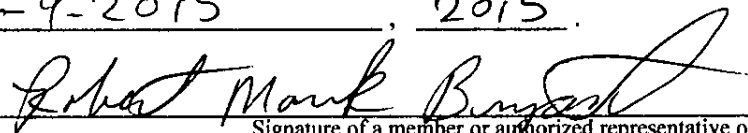
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: 1-15-2015 (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 1-9-2015, 2015



Signature of a member or authorized representative of a member

ROBERT MARK BRYANT

Typed or printed name of signee

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Filing Fee: \$25.00

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