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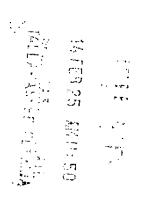
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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 3, 2014

STEPHEN HEPSTALL 4519 MERSON LN JACKSONVILLE, FL 32205

SUBJECT: CONCRETE PROFESSIONALS OF FLORIDA, LLC

Ref. Number: L13000166969

We have received your document for CONCRETE PROFESSIONALS OF FLORIDA, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 814A00002329

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

www.sunbiz.org

COVER LETTER

TO: Registration Section **Division of Corporations**

Concrete Professionals of Florida 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:

Stephen L. Hepstall

Concrete Professionals of Florida LLC

Firm/Company

4519 Merson Ln.

Address

Jacksonville, FL 32205

City/State and Zip Code

concrete_professionals@outlook.com

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

For further information concerning this matter, please call:

Stephen L. Hepstall

at (904) 885.8839

Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□ \$30:00 Filing Fee.& Certificate of Status □ \$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

Concrete Professionals of					
(Name of the Limi	ted Liability Compa (A Florida Limited)	ny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited L	iability Company	were filed on 11-31-2013	a	nd assig	gned
Florida document number L13000166969	<u></u> ,				
This amendment is submitted to amend the foll	owing:				
A. If amending name, <u>enter the new name o</u>	f the limited liab	ility company here:			
Concrete Professionals of Florida LL					
The new name must be distinguishable and end with the	words "Limited Liab	oility Company," the designation "LLC" or	r the abbrevi	ation "L.	L.C."
Enter new principal offices address, if applic	cable:	4519 Merson Ln.			
(Principal office address MUST BE A STREE		Jacksonville, FL 32205	72.0		
Timesput Office numeros 17001 19271 5 1100	7122111557	· · · · · · · · · · · · · · · · · · ·		77	
					•
Enter new mailing address, if applicable:		4519 Merson Ln.		ेंद्र	
(Mailing address MAY BE A POST OFFICE	BOX)	Jacksonville, FL 32205		17	
			1-3	 (B)	
			E.L. (TT)	Œ	
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:		<u>e</u> :	nter the p	iame o	f the ne
Name of New Registered Agent.	·				
New Registered Office Address:	4519 Mers				
		Enter Florida street address			
	Jacksonvill	e, Florid	a 32205		
		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 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.

Iteshew J. Henstall

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member <u>Title</u> <u>Address</u> **Type of Action** <u>Name</u> 4519 Merson Ln. Stephen L. Hepstall **MGR** Add Jacksonville, FL 32205 □ Remove Elisa D. Ingram 4519 Merson Ln. **AMBR** I⊡ Add Jacksonville, FL 32205 Remove 4519 Merson Ln. George G. Worley **AMBR** □ Add Jacksonville, FL 32205 <u>ビー</u>口 Remove □ Remove I□ Add □ Remove

Effective date, if other than the date of filing:	(optional)
The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be	(optional) more than 90 days after
Effective date, if other than the date of filing: The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be the date this document is filed by the Florida Department of State) Onted 01-27-2014	(optional) more than 90 days after
The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be the date this document is filed by the Florida Department of State:	more than 90 days after

Page 3 of 3

Filing Fee: \$25.00