L140000 25244

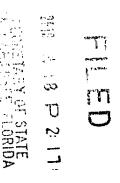
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT.	MAIL
/P.	siness Entity Nar	ma)
(Du	Shiess Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		;

Office Use Only



800287984058

07/18/16--01030--017 **60.00



S Warren JUL 19 2016

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Classic Pool Decks & Patios 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 Diffy Name of Person
Classic Pool Decks & Patios UC
6142 39th CT Fast
Bradenton FL 34203 Classic Dool decks @ a Mail COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (941) 745 - 2255 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) 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

The Articles of Organization for this Limited Liability Company were filed on 2/13/2014 and assigned Florida document number 14000025344. This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Classic Pool Decks & I	v as it now appears on our records.) ability Company)	
A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida Florida	The Articles of Organization for this Limited Liability Company v	, ,	_ and assigned
The new name must be distinguishable and contain 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) 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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	This amendment is submitted to amend the following:		
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	A. If amending name, enter the new name of the limited liabil	ity company here:	
(Principal office address MUST BE A STREET ADDRESS) 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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida Florida	The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" or the abbre	viation "L.L.C."
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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	Enter new principal offices address, if applicable:		
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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	(Principal office address MUST BE A STREET ADDRESS)	P Style	1.00 10001
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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida		 	No. The Control of
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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida		(a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	a b
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: New Registered Office Address: Enter Florida street address Florida	Enter new mailing address, if applicable:	nies.	
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: New Registered Office Address: Enter Florida street address , Florida	(Mailing address MAY BE A POST OFFICE BOX)	ET CO	·
Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida		SRI	
Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida		A	ب
New Registered Office Address: Enter Florida street address , Florida			e name of the new
Enter Florida street address, Florida	Name of New Registered Agent:		
	New Registered Office Address:		
		Enter Florida street address	
City Zip Code			
		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.

If Changing Registered Agent, Signature of New Registered Agent

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

Title Title <u>Name</u> <u>Address</u> **Type of Action** 6607 E 88th Street Larry Brunatti Bradenton FL 34202 _□ Change MGR Monty V. Kiser 2721 Dueby Street Sarasola FL 34231 □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add □-Remove __ Remove ☐ Change

			· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
					
 				<u>.</u>	
		<u> </u>			
 	 -	·			·
					
f an effective date is listed, the da Note: If the date inserted in t	te must be specific and his block does not m	cannot be prior to date neet the applicable s	e of filing or more that tatutory filing requ	(optional) n 90 days after filing, irements, this date) Pursuant to 605.020
an effective date is listed, the date inserted in to the date inserted in the date inserted in the date on the date on	te must be specific and his block does not me the Department of S	cannot be prior to date neet the applicable state's records.	tatutory filing requ	n 90 days after filing, irements, this date	.) Pursuant to 605.02: will not be listed a
f an effective date is listed, the date Note: If the date inserted in to document's effective date on e record specifies a delete The 90th day after the	te must be specific and his block does not me the Department of S	cannot be prior to date neet the applicable state's records.	tatutory filing requ	n 90 days after filing, irements, this date	.) Pursuant to 605.02(will not be listed a
f an effective date is listed, the date Note: If the date inserted in to document's effective date on e record specifies a delete The 90th day after the	te must be specific and his block does not me the Department of S layed effective de record is filed.	cannot be prior to date neet the applicable state's records.	tatutory filing requ	n 90 days after filing, irements, this date	on the earlier
Effective date, if other that fan effective date is listed, the date Note: If the date inserted in the document's effective date on the record specifies a deleta The 90th day after the Dated	the must be specific and his block does not me the Department of Stayed effective de record is filed.	cannot be prior to date neet the applicable state's records.	tatutory filing requ	at 12:01 a.m.	on the earlier

Page 3 of 3

Filing Fee: \$25.00