14000064239

(Requ	estor's Name))
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(City/s	State/Zip/Phor	ne #)
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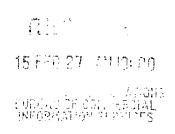
	egistration Section ivision of Corporations
SUBJECT	American Maintenance Professionals, LLC
SUBJECT	Name of Limited Liability Company
The enclos	ed Articles of Amendment and fee(s) are submitted for filing.
Please retu	rn all correspondence concerning this matter to the following:
	Thomas E Byrd, Jr.
	Name of Person
	American Maintenance Professionals, LLC
	Firm/Company
	206 Randy Rd.
	Address
	Panama City Beach, FL 32413
	City/State and Zip Code
	64tbyrd@comcast.net
	E-mail address: (to be used for future annual report notification)
For further	information concerning this matter, please call:
Thomas	Byrd 850 258-6259
	Name of Person Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:
\$25.96	Filing Fee Solution Filing Fee & Certificate of Status Status Solution Status

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





February 17, 2015

THOMAS E BYRD JR AMERICAN MAINTENANCE PROFESSIONALS LLC 206 RANDY RD PANAMA CITY BEACH, FL 32413

SUBJECT: AMERICAN MAINTENANCE PROFESSIONALS LLC

Ref. Number: L14000064239

We have received your document for AMERICAN MAINTENANCE PROFESSIONALS LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is L14000056165 (BYRD HOME IMPROVEMENTS LLC).

Please return 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.

Tammy Hampton Regulatory Specialist III

Letter Number: 515A00003330

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

American Maintenance Pr	•			
(Name of the Limi	ted Liability Compa (A Florida Limited	ny as it now appears Liability Company)	on our records.)	TAL SE
				THE THE
The Articles of Organization for this Limited L	iability Company	were filed on 04/2	20/2014	and assigned.
Florida document number L14000064239				25 - 1 1
	,			Ha B
This amendment is submitted to amend the following	lowing:			FIST : U
A. If amending name, enter the new name of	of the limited liab	ility company her	<u>e</u> :	ANII: 59 ANII: 59 FF. FLORIG
Tom Byrd's Home Improvement, LLC				→
The new name must be distinguishable and end with the	words "Limited Liab	oility Company," the de	esignation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if appli-	rahla:			
• • •		206 Randy R	'd	
(Principal office address MUST BE A STRE	<u>ET ADDKESS)</u>	Panama City Beach, FL 32413		
		Fariania City	Beach, FL 32	.413
				r
Enter new mailing address, if applicable:		N/A		
(Mailing address MAY BE A POST OFFICE	BOX)			
		· · · · · · · · · · · · · · · · · · ·		
				<u></u>
B. If amending the registered agent and	l/or registered o	ffice address on	our records, ei	iter the name of the ne
registered agent and/or the new registered of			, _	
Name of New Registered Agent:	Thomas E. Byrd, Jr.			
New Registered Office Address:	206 Randy	Rd.		
		Enter Floria	la street address	
	Panama Ci	ty Beach	. Florid	_a 32413
		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.

Page 1 of 3

If Changing Registered Agent Signature of New Registered Agent

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Rick D. Williams	2423 Allison Ave.	
		Panama City Beach, FL 32408	■ Remove
AMBR	Robert L. Oakley	806 Ave. C	
		Panama City Beach, FL 32413	Remove
			☐ Remove
			SECRETARY OF SECRETARY SEE FI.
			FLORIDA Add
			□ Remove
	 		
			Remove

_ , ,	n, enter change(s) here: (Attach additional rship, please amend to sole proprieto	* * *
E. Effective date, if other than the da (The effective date must be specific, cannot lead the date this document is filed by the Floric	be prior to date of receipt or filed date and cannot be mo	(optional) ore than 90 days after
Dated February 23	men 4 6 1	
•	gnature of a member or authorized representative of a Mass E Byrel. Typed or printed name of signee	member
		27 AH II: 59 HASSEF, FLORIDA

Page 3 of 3

Filing Fee: \$25.00