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## **COVER LETTER**

TO: Registration Sect Division of Corpo			
SUBJECT: <u>Cathey</u>		elopment of Cêntral Flo ited Liability Company	rida, LIC
The enclosed Articles of Ar	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	lence concerning this matter	to the following:	
	Cecelia_i	Anderson Name of Person	<del></del>
	Cathey Co	nstruction & Development Firm/Company	t LIC
	PO_Box_1.	3107 Address	
	Mexico	Beach, FL 32410 City/State and Zip Code	
	caa@catheyconstruc E-mail address: (	ction.com to be used for future annual report notifi	cation)
For further information con	cerning this matter, please ca	all:	
Cecelia Name of P	Anderson erson	at ( <u>850</u> ) <u>648–510</u> Area Code Daytime	OO Telephone Number
Enclósed 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:

TO

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

FILED 2014 NOV -5 PM 12: 39

SECKETARY OF STATE TALLAHASSER, FLORIDA

Cathey Construction & Development of (Name of the Limited Liability Company (A Florida Limited Liability Company)	of Central Florida, LLC y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company w	
Florida document number <u>L14000163552</u>	
Γhis amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liabili</u>	ity company here:
The new name must be distinguishable and end with the words "Limited Liabili	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	13403 106th Avenue North
Principal office address MUST BE A STREET ADDRESS)	Largo, FL 33774
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX	
B. If amending the registered agent and/or registered offi	ce address on our records, enter the name of the i
registered agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	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 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 = Mar AMBR = Aut	nager horized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Jeremy T Fasen	13403 106th Avenue N	□ Add
		Largo, FL 33774	<b>⊠</b> Remove
AMBR	Ragnar Construction Group, 1	LI <u>C 13403 106th Avenue North</u>	<b>⊠</b> Add
		Largo, FL 33774	□ Remove
			□ Remove
			Remove
			Add
			□ Remove
			□ Remove

pated 10-30-2014  Signature of a member or authorized representative of a member	, anicia	ing any other information, enter change(s) here: (Altach additional sheets, if necessary.)
Dated 10-30-2014  Signature of a member or authorized representative of a member	·	
Dated 10-30-2014  Signature of a member or authorized representative of a member		
Dated 10-30-2014  Signature of a member or authorized representative of a member		
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		
Dated 10-30-2014  Signature of a member or authorized representative of a member	Effective	date, if other than the date of filing: (optional)
Signature of a member or authorized representative of a member		
	Dated	10-30-2014
		Myse
		Signature of a member or authorized representative of a member
William B Cathey, AMBR Typed or printed name of signee		William B Cathey, AMBR

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Filing Fee: \$25.00

