

2150000 17771

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers MAR 04 2015

707



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 19, 2015

derek morrison  
411 walnut st #8552  
green cove springs, FL 32043

SUBJECT: FDMC CONSTRUCTION LLC  
Ref. Number: L15000017331

We have received your document for FDMC CONSTRUCTION LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Justin M Shivers  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 015A00003547

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** FDMC Construction LLC  
Name of Corporation

**DOCUMENT NUMBER:** L15000017331

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Derek Morrison**

Name of Contact Person

Firm/Company

**411 Walnut Street #8552**

Address

**Green Cove Springs, FL 32043**

City/State and Zip Code

**dwm2000@icloud.com**

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

For further information concerning this matter, please call:

**Derek Morrison**

Name of Contact Person

at ( **954** ) **451-6562**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$35.00 Filing Fee

☐ \$43.75 Filing Fee & Certificate of Status

☐ \$43.75 Filing Fee & Certified Copy

☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

FDMC Construction 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 01/29/2015 and assigned  
Florida document number L15000017331.

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 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)**

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

411 Walnut Street #8552

Green Cove Springs, FL 32043

**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

*City*

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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, 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>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Fred Lawless	8800 South Ocean Drive, Apt 1205	<input type="checkbox"/> Add
		Jensen Beach, FL 34957	<input checked="" type="checkbox"/> Remove
AMBR	Fred Lawless	614 Spring Valley Road	<input checked="" type="checkbox"/> Add
		Morristown, NJ 07960	<input type="checkbox"/> Remove
AMBR	Mary Lawless	8800 South Ocean Drive, Apt 1205	<input type="checkbox"/> Add
		Jensen Beach, FL 34957	<input checked="" type="checkbox"/> Remove
AMBR	Mary Lawless	614 Spring Valley Road	<input checked="" type="checkbox"/> Add
		Morristown, NJ 07960	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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TALLAHASSEE FLORIDA

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

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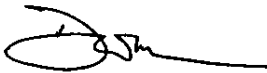
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

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

February 23 2015

Dated \_\_\_\_\_



Digitally signed by Derek Morrison  
DN: cn=Derek Morrison, o, ou,  
email=dwm2000@icloud.com, c=US  
Date: 2015.02.23 21:11:26 -04'00'

Signature of a member or authorized representative of a member

Derek Morrison

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

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