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(Re	equestor's Name)	
(Ad	ldress)	
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2016 DEC 27 A 10: 24
SECRETARY OF STATE
TALLAHASSEE, FLORID

D. BRUCE DEC 29 2016

COVER LETTER

TO: Registration Se Division of Cor			•
SUBJECT: TEMCO	Services, LLC		
	Name of Lim	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Nathan Pardue		
		Name of Person	
	Titus Construction		
		Firm/Company	
	401 E. Las Olas, Suite 140	00	
	·	Address	
	Fort Lauderdale, Florida 3	3301	201 SE TAL
		City/State and Zip Code	2016 DEC 27 SECRETARY ALLAHASSE
	Nate@titusbuild.com	A b C C C C C C C C C C C C C C C C C C	ASS C
For further information co	e-mail address: (to be used for future annual report notifi all:	m. Li
Nathan Pardue		954 328-1829 at ()	A IG 21 BF STATE FLORID
Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a check for th	e 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

TEMCO Staffing, LLC		
(Name of the Limited Liability C (A Florida Lin	ompany as it now appears on our rec nited Liability Company)	ords.)
he Articles of Organization for this Limited Liability Com	pany were filed on	and assigned
lorida document number L15000052612		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited	liability company here:	
EMCO Services, LLC		
ne new name must be distinguishable and contain the words "Limited	Liability Company," the designation "I	LC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRES	S)	
	<u>*</u>	28 7AL
		LLAF
nter new mailing address, if applicable:		HASS DEC
Mailing address MAY BE A POST OFFICE BOX)		SEE 3
. If amending the registered agent and/or registere	#1.100 - 1.100 ·	SA G
		rds, enter the name of the
gistered agent and/or the new registered office address	here:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street ada	tress
		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

EFFECTIVE DATE 12/30/14

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 = MS $AMBR = AS$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□ Remove
			Change
			□ Add
			Remove
			Change
			🖸 Add
			Remove
			TALECRE IN TANAS
			HASSEE FLORIDA
			□ Add
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fective date, if other than the d	ate of filing:	12/30/2016		4	optional)		
n effective date is listed, the date must I	e specific and ca	nnot be prior to	date of filing or	more than 90 days	after filing.) Pu	rsuant to	605.020
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burnone a official to date of the Dop	artinent of Stat	c s records.					
record specifies a delayed	effective dat	e, but not :	an effective	time at 12·	niam on	the es	rlier 4
he 90th day after the reco		e, bachot	an onechve	unic, at 12.	or ann. On	the ea	, nei t
ted	,	2016					
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Typed or printed name of signee

Filing Fee: \$25.00