115000073511

(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO: Registration Section
Division of Corporations

RAW Excavation, LLC
SUBJECT:

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:

	Randall Allen Whitfield		
		Name of Person	<u>.</u>
	RAW Excavation, LLC		
		Firm/Company	
	1301 Creekview Court		
		Address	
	St. Cloud, Florida 34772		
		City/State and Zip Code	
	rawexcavation@gmail.com		
	E-mail address: (to be used for future annual report notifi	cation)
For further information c	oncerning this matter, please ca	ail:	
Randall Allen Whitfield		407 508-6824 at ()	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for th	ne 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

RAW Excavation, LLC

ALEGANAS PALES (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 April 27,2015	and assigned
Florida document number L15000073511		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
RAW Services, LLC		
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or t	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1301 Creekview Court	
Principal office address MUST BE A STREET ADDRESS)	St.Cloud, Florida 34772	

Enter new mailing address, if applicable:	1301 Creekview Court	
Mailing address MAY BE A POST OFFICE BOX)	St. Cloud, Florida 34772	
 If amending the registered agent and/or registered of egistered agent and/or the new registered office address here 		nter the name of the r
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida City	RZip Code
New Registered Agent's Signature, if changing Registered Agent:	5,	24 0000
horaby account the appointment as reciptored agent and age		

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 = M AMBR = A	lanager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			□ Remove
			□ Change
			□ Add
			□ Remove
			☐ Change
			Add
			Remove
			Change
			Add
			☐ Remove
			☐ Change
			Add
			□ Remove
			☐ Change
			☐ Remove
			□ Change

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Note: If the date inser	er than the date of filing:(optional) I, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 and in this block does not meet the applicable statutory filing requirements, this date will not be listed as atte on the Department of State's records.
	a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of er the record is filed.
Dated May 31	Signature of a member of authorized representative of a member
·	en Whitfield

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00