LIS000 143859

(Re	questor's Name)		
(Ad	dress)		
(Ad	ldress)		
(Cit	ry/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	isiness Entity Nar	me)	
(Do	ocument Number)		
Certified Copies	Certificates of Status		
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2015 AUG 31 AM 8: 04 SECRETARY DESTATE

N. Outtown SEP - 3 2015

COVER LETTER

	giştration Sec vision of Corp			
CUBIDAT	ASHTON C	CONTRACTING, LLC		*
SUBJECT:	, , , 	Name of Limi	ted Liability Company	
The enclose	ed Articles of	Amendment and fee(s) are sub	nitted for filing.	
Please retur	n all correspo	ndence concerning this matter	to the following:	
		ERIN S ASHTON		
			Name of Person	
		ASHTON CONTRACTIN	G, LLC	
			Firm/Company	·
		13383 BANYAN RD		
			Address	
		SPRING HILL, FL 34609		
			City/State and Zip Code	, , , , , , , , , , , , , , , , , , ,
		YAMAHARACING@TAN		
E (Ca)			to be used for future annual re	port notification)
ror turther	information c	oncerning this matter, please ca	aii:	
ERIN S AS	SHTON		727 243- at ()	-1361
	Name o	f Person	Area Code	Daytime Telephone Number
Enclosed is	s a check for the	ne following amount:		
\$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy	□ \$60.00 Filing Fec, Certificate of Status &

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

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

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
2015 AUG 31 AH 8: 04
SECRETARY OF STATE
VALLARIASSEE, FI OFFISA

Zip Code

			。
ASHTON CONTRACTING, LLC			,
(Name of the Limit	ed Liability Company as it t (A Florida Limited Liability (now appears on our records.) Company)	
ne Articles of Organization for this Limited Lorida document number	iability Company were fi	led on AUGUST 21, 2015	and assigned
nis amendment is submitted to amend the following	owing:		
. If amending name, enter the new name o	f the limited liability co	mpany here:	
e new name must be distinguishable and contain the v	ords "Limited Liability Com	pany," the designation "LLC" or the	abbreviation "L.L.C."
nter new principal offices address, if applic	able:		
<u> Principal office address MUST BE A STREE</u>	<u>TADDRESS)</u>		
nter new mailing address, if applicable:			·····
<u> Aailing address MAY BE A POST OFFICE</u>	<u>BOX)</u>		
			<u> </u>
. If amending the registered agent and egistered agent and/or the new registered o		ddress on our records, <u>ente</u>	r the name of the
Name of New Registered Agent:	ERIN S ASHTON		
New Registered Office Address:	13383 BANYAN ROA		
		Enter Florida street address	
	SPRING HILL	F21	34609

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.

City

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 uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			☐ Remove
			Change
			Add
			☐ Remove
			☐ Change
			Add
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Effective date, if other than the	data of filing:	AUGUST 21,	2015	(opti	anal)	
If an effective date is listed, the date mus	t be specific and ca	unnot be prior to o	date of filing or me	ore than 90 days after	filing.) Pursuant to 6	05.0207 (3)
Note: If the date inserted in this blo document's effective date on the De			e statutory ming	g requirements, thi	s date will not be it	sted as the
he record specifies a delayed The 90th day after the reco	effective dat ord is filed.	e, but not a	n effective t	ime, at 12:01 a	a.m. on the ear	lier of:
Dated AUGUST 28	? .	2015				
\leq	0 1		<i>z</i> _			
		17.	ed representative	<u> </u>		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00