

415000177190

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

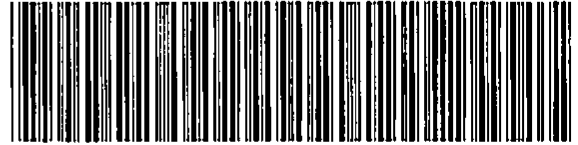
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19 FEB 22 PM 3:45  
TALLAHASSEE, FLORIDA

FEB 23 2019

S. YOUNG



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 8, 2019

BRYAN D JUDAH  
SUMMIT CONTRACTING GROUP, LLC  
1000 RIVERSIDE AVENUE STE 800  
JACKSONVILLE, FL 32204

SUBJECT: SUMMIT COMMERCIAL GROUP, LLC  
Ref. Number: L15000177190

We have received your document for SUMMIT COMMERCIAL GROUP, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

SUMMIT CONTRACTING GROUP, INC - P07000004432

Please return 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) 245-6050.

Shelia H Young  
Regulatory Specialist II

Letter Number: 519A00000555



February 19, 2019

**VIA EMAIL, REGULAR U.S. MAIL**

Registration Section  
Division of Corporations  
Attn: Shelia H. Young, Regulatory Specialist II  
P.O. Box 6327  
Tallahassee, FL 32314

**Re: SUMMIT COMMERCIAL GROUP, LLC**  
**Ref. Number: L15000177190**

Dear Registration Section:

Please accept the enclosed revised Articles of Amendment correcting the naming issue raised in the letter issued in response to the Articles of Amendment originally submitted with respect to the above Reference Number.

Should you have any questions or if there are further issues with the enclosed Articles of Amendment, please let me know as soon as possible

Sincerely,

Bryan D. Judah, General Counsel

Enclosure

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SUMMIT COMMERCIAL GROUP, LLC

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:

Bryan D. Judah

Name of Person

Summit Contracting Group, LLC

Firm/Company

1000 Riverside Ave., Suite 800

Address

Jacksonville, FL 32204

City/State and Zip Code

rwillis@summit-contracting.com

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

For further information concerning this matter, please call:

Bryan D. Judah

904

268-5515

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed 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:

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

RECEIVED  
TALLAHASSEE, FLORIDA  
JAN 27 2007

FILED

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

SUMMIT COMMERCIAL GROUP, 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 10/19/2015 and assigned  
Florida document number L15000177190.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Summit Contracting Group FL, LLC

The new name must be distinguishable and contain 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)

**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 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person 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>
MGR	SUMMIT CONTRACTING GROUP, INC.	1000 RIVERSIDE AVENUE SUITE 800	<input type="checkbox"/> Add
		Jacksonville, FL 32204	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	PADGETT, MICHAEL M.	1000 Riverside Avenue, Suite 800	<input checked="" type="checkbox"/> Add
		Jacksonville, FL 32204	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	CORNELIUS, BERNARD R.	1000 Riverside Avenue, Suite 800	<input checked="" type="checkbox"/> Add
		Jacksonville, FL 32204	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	PADGETT, NICOLE S.	1000 Riverside Avenue, Suite 800	<input checked="" type="checkbox"/> Add
		Jacksonville, FL 32204	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

 \_\_\_\_\_  
Signature of a member or authorized representative of a member

Typed or printed name of signee