Florida Department of State Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000273380 3)))

Note: DO NOT hit the REFRESH/RELOAD hutton on your browser from this page. Doing so will generate another cover sheet.

10:

Division of Corporations Fex Number : (650) 617-6313

Fren:

Account Name : DRUMNOND WERLE LLP
Account Number : 120030000133
Phone : (413)983-8000
Fax Number : (913)983-0001

Enter the email address for this business withty to be used for future while report sellings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AKERS & ALVES, LLC

Certificate of Status	0
Certified Copy	U
Page Count	04
Estimated Charge	\$25,00

Electronic Filing Menu

Corporate Filing Menu

Help

N Sampar NOS (V 1007) 11/16/2015 1:49 PM

ထု

P. 002/005

(H1500273380 3)

COVER LETTER

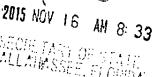
	legistration Sectorial Sector (1997)			
SUBJE Č T	Akers & Alv	es, LLC		
SOBJECT	•	Name of Limit	ed Liability Company	
The enclos	sed Articles of A	amendment and fee(s) are subn	nitted for filing.	
Please reti	um all correspon	dence concerning this matter t	o the following:	
		Temple H. Drummond		
	•		Name of Person	
		Drummond Wehle LLP		
		 	Firm/Company	***
		6987 East Fowler Avenue		
			Address	
	•	Tampa, Florida 33617		
		temple@dw-firm.com	City/State and Zip Code	
			o be used for future annual report notifi	cation)
For further	er information co	oncerning this matter, please ca	ill:	
Temple I	H. Drummond		813 983-8000	
	Name of	'Person	at (Telephone Number
Enclosed	is a check for th	e following amount:		
\$25.0	0 Filing Fee	S30,00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filling Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		ING ADDRESS:	STREET/COURT	

MAILING ADDRESS; Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

(HII 5000 273380 3)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Akers & Alves, LLC		
(Name of the Limited Lin (A Flo	thility Company as it now appears on our recoorda Limited Liability Company)	rds.)
he Articles of Organization for this Limited Liabilit	y Company were filed on 10/30/2015	and assigned
lorida document number L15000184273	·	
nis amendment is submitted to amend the following	3.	
If amending name, enter the new name of the	limited liability company here:	
kers & Alves Topgrading, LLC		
ne new name must be distinguishable and contain the words "	Limited Liability Company," the designation "Li	.C" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET AD	DDRESSI	
nter new malling address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>		
. If amending the registered agent and/or registered agent and/or the new registered office a	egistered office address on our recor address here:	ds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	•	
	Enter Florida street add	- ess
		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

Page 1 of 3

(H15000273380 3)

MGR = Manager

3 8001 P. 004/005 (H15000 273380 3)

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = A	uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			_□ Remove
			☐ Change
			Add
			□ Remove
			□ Change
			Add
			☐ Remove
			Change
			□ Remove
			☐ Change
			Add
			☐ Remove
			☐ Change
			_ □ Remove
			☐ Change

Page 2 of 3

NNU-	16-	.20	15	(MNN)	13.	21

Drummond Wehle LLP

(FAX)813 983 800	(F	AX)	813	983	800
------------------	-----	-----	-----	-----	-----

(H15000 273380 3)

- · · · · · · · · · · · · · · · · · · ·					
			····		
					
	<u> </u>				
		• • • • • • • • • • • • • • • • • • • •			
					201
	12.				2015 NOV
					91
				<u> </u>	A
	· · · · · · · · · · · · · · · · · · ·				<u>အ</u> 33
· · · · · · · · · · · · · · · · · · ·					ω
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and o Note: If the date inserted in this block does not me document's effective date on the Department of States.	unnot be prior to dut et the applicable :	e of filing or more tha	(optional) on 90 days after filing.) direments, this date v	Pursuant to 605.02 vill not be listed	907 (3)(b) as the
the record specifies a delayed effective da b) The 90th day after the record is filed.	te, but not an	effective time,	at 12:01 a.m. c	on the earlier	of:
Dated 11/16/2015					
Dated 11/16/2015 Temple-H-Signature of a m	ember or audiorize	ruttario	agen t		

Page 3 of 3

Filing Fee: \$25.00

(H15000 273380 3)