

L16 0000 SPS12

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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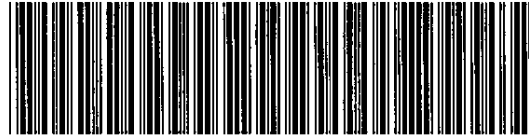
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TREASURY OF FLORIDA  
JUL 14 P 12:15

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S Warren

JUL 15 2016

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Seminole Contracting 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:

Pamela C. Britt

Name of Person

Seminole Contracting, LLC

Firm/Company

2713 Parramore Shore Rd

Address

Tallahassee, FL 32310

City/State and Zip Code

Christy.SeminoleContracting@gmail.com

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

For further information concerning this matter, please call:

Pamela (Christy) Britt at (850) 544-4756

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

*Emmole Contracting, 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 3/23/2016 and assigned Florida document number L16000058512

This amendment is submitted to amend the following:

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

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**)

2713 Parramore Shore Rd  
Tallahassee, FL 32310

✓ Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

2713 Parramore Shore Rd  
Tallahassee, FL 32310

**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.

X  
If Changing Registered Agent, Signature of New Registered Agent

FILED  
MAR 14 2016  
CLERK OF DISTRICT COURT  
STATE OF FLORIDA

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

Title	Name	Address	Type of Action
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MGR

Name

Remove

James E  
Stegle

Address

3849 Killeen Court

☐ Add

Tallahassee, FL 32309

☒ Remove

☐ Change

☐ Add

☐ Remove

☐ Change

Add

AMBR

Robert C.  
Britt

2713 Parramore Stores

☒ Add

Tallahassee, FL 32310

☐ Remove

☐ Change

☐ Add

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated July 11, 2016.

Pamela C. Britt  
Typed or printed name of signee

FILED  
2011 JUL 4 PM 12:16  
CLERK OF STATE  
TALLAHASSEE, FLORIDA