1/60010/402

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GREG D CROSSLIN 3999 COMMONS DR W STE D DESTIN, FL 32541

SUBJECT: ELEVATED CONCRETE AND MASONRY, LLC

Ref. Number: L16000101402

We have received your document for ELEVATED CONCRETE AND MASONRY, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please type or print name of signee.

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 calls (850) 245-6051.

Dionne M Pijeaux Regulatory Specialist

Letter Number: 417A00019814

 \Box

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ELEVATED CONCRETE AND MAS (Name of the Limited Liability Compar (A Florida Limited L		
(A Florida Limited L	iability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 05/24/2016 and assign	ned
Florida document number <u>L16000101402</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C	
Enter new principal offices address, if applicable:	217 Bay Street NW	
(Principal office address MUST BE A STREET ADDRESS)	Fort Walton Beach FL 32548	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Fort Walton Beach FL 32548	<u></u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	fice address on our records, enter-the name of	the no
	FLEXII	\supset
Name of New Registered Agent:	<u> </u>	
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>	Address	Type of Action
MGR	JIMMY L, HOOD II	794 North County Hwy 393, Ste. G	
		Santa Rosa Beach, FL 42459	□ Remove
			Change
VP	JAMES H. SHEER	794 North County Hwy 393, Ste. G	
		Santa Rosa Beach, FL 42459	🗓 Remove
			Change
MGR/PRES	MICHAEL HAWTHORNE	217 Bay Street, NW	🖸 Add
		Fort Walton Beach, FL 32548	Remove
		TALLAHASSE, FLORES	Change Add Remove Change Add Add
			Remove
			🗆 Add
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Filing Fee: \$25.00