Division of Corporations

Page 2 of 5

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.

(((H16000256661 3)))



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

2 (3'1)

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : APT PROCESSING

Account Number : 120110000069 Phone : (954)567-0013 Fax Number : (954)567-3401

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

. Email Address: kathy@apiprocessing.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TOWNSEND CONSTRUCTION & RENOVATION, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menus Warren Help

OCT 19 2016

17/18/2016 10:18 API Processine

9545673401

HO.429 #001

850-617-6381

10/18/2016 9:10:07 AM PAGE 1/001

Fax Servor

Bp 1005



October 18, 2016

FLORIDA DEPARTMENT OF STATE

TOWNSEND CONSTRUCTION & RENOVATION, LLC 346 19TH AVE
VERO BEACE, FL 32962US

SUBJECT: TOWNSEND CONSTRUCTION & RENOVATION, LLC

REF: L16000117644

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Due to transmission problems, your faxed document or coversheet is illegible or incomplete. Please refax the document and cover sheet to this office for processing.

Document is too dark to read

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) 245-6051.

Stacey M Warren Regulatory Specialist II FAX Aud. #: H16000256661 Letter Number: 816A00022319

ZOIT OCT 18 MID: 56
SELVETAR SEE PLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

Page 3065

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	nd Construction & Renovation, LLC		
(Name of the Limi	ed Liability Company as it now appear (A Florida Limited Liability Company)	s on our records.)	<u> </u>
the Articles of Organization for this Limited L lorida document number	•	June 17, 2016 ar	d assigned
his amendment is submitted to amend the foll	owing:	•	,
. If amending name, <u>enter the new name o</u>	f the limited liability company he	<u>:re</u> :	
he new name must be distinguishable and contain the v	vords "Limited Liability Company," the d	esignation "LLC" or the abbreviati	on "L.L.C."
nter new principal offices address, if applic	able:		2
Principal office address MUST BE A STREE	TADDRESS)	<u>් ර</u> කති	छ। सु
		27 A	Annual Sections (C.)
enter new mailing address, if applicable:		37 O	∞ ⊓
Mailing address MAY BE A POST OFFICE BOX)		S	
		PRIDE	.
		Ä	o *
 If amending the registered agent and egistered agent and/or the new registered o 	or registered office address ou ffice address here;	our records, enter the n	ume of the
Name of New Registered Agent:	Michelle T. Van Keulen		
New Registered Office Address:	346 19th Averine		
	Enter Flo	ida street address	
	Vero Beach	Florida 32962	
	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

H16000256661 3
Pagfe 4 of 5
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 Me

Title	<u>Name</u>	Address	Type of Action
AR	Joseph Is. Townsend, Jr.	2465 44th Avenue	
		Vero Beach, FL 32966	Remove
			Add
			PRemove
	·	**	Change
			□ Add
			□ Remove
			Change
			Add
			□ Reniove
			Change
			
			□ Remove
			Change
			AND
			LI Keltiove
			H16000256661 3
	Page 2 o	r 3	H16000256661 3

0/18/5019 10:13	API Processing	9545673401	HO.429	#885 #865
amending any other	· information, enter change	c(s) here: (Attach additional		
		(*,	····, <i>y</i> ····· <u>z</u> , ,	
, , , , , , , , , , , , , , , , , , , 		•		····
,				
				
		<u> </u>		
				
	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	
				•
				
	· -	······································		
an effective date is listed, the ote; If the date inserted seument's effective date in record specifies a	in this block does not meet the continue of State's	t be prior to date of filing or more die applicable statutory filing req	uirements, this date wi	ll not be lis
ited / /0 - /	<u> </u>	A16- `		
		<u>الحاج</u> ،		
1 Mi	chollo Van	Ken der or authorized representative of a	member	 :
1 Mi	Mi	r or authorized representative of a	10 mg	
1 Mi	Mi		member 280 GT 10 O	