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SECRETARY OF STATE

D. SCOTT NOV 1 7 2016

COVER LETTER

TO: Registratio	on Section f Corporations		
SUBJECT:	Long view Byilders, LLC Name of Limited Liability Company		
	les of Amendment and fee(s) are submitted for filing.		
Please return all cor	rrespondence concerning this matter to the following:		
	John H. Chasey, II Name of Person		
	Longview Builders, LLC Firm/Company	16 NOV SECRET	F.
	1240 - 58th St. W. Address	16 PH 3 OT ARY OF STATE SSEE, FLORID	FILED
	Bradenton, FL 34209 City/State and Zip Code	3 O7	
	John h. Chasey @ amail. com E-mail address: (to be used for future abdual report notification)		
For further informat	ation concerning this matter, please call:		
<u>John</u>	H. Chasey II at (941) 713-1993 Name of Person Telephone Number Area Code Daytime Telephone Number		
Enclosed is a check	k for the following amount:		
□ \$25.00 Filing F	Certificate of Status Certified Copy Certificate (additional copy is enclosed) Certified C	e of Status &	

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

and assigned
abbreviation "L.L.C."
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er the name of the new
<u> </u>
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

Title	<u>Name</u>	Address	Type of Action
AMBR	Kenneth Stinson	8810 36th Ave. E.	🗗 Add
		Palmetto, FL 34221	□ Remove
			Change
AMBR	Adam Chasey	5535 1st Ave. E.	🖸 Add
		Apt. # 108	Remove
		Bradenton, FL 34208	☐ Change
			Add
			□ Remove
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Note: If the	date is listed, the condition date inserted in effective date or	this block doe	es not me	et the appl	icable statu	filing or more tory filing r	than 90 da equiremen	ys after fi its, this (lling.) Purs date will	suant to 6 not be li	05.0207 (isted as t
e record The 90ti	specifies a do h day after th	elayed effect e record is	tive da filed.	ite, but r	ot an eff	ective tin	ne, at 12	:01 a.	m. on t	he ear	lier of:
Dated	11 -	10	,	2011	<u>.</u>						
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Filing Fee: \$25.00