## 11700247892

(Re	questor's Name)	
hd)	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



300306692843

12/20/17--01002--008 \*\*25.00

D. SCOTT NEC 2.1 2017

## **COVER LETTER**

	Registration Se Division of Cor			
SHR IF7		MOORE SR. CONSTRUCTO	OR L.L.C.	
SUBJEC	· · · <u></u>	Name of Lin	nited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Derra L. Moore Sr		
			Name of Person	<del></del>
		DERRA L. MOORE SR.	CONSTRUCTOR L.L.C.	
			Firm/Company	<del></del>
		8342 New Kings Rd		
			Address	<del>-</del>
		Jacksonville, FL 32219		
		derragator@hotmail.com	City/State and Zip Code	
		<del>_</del>	to be used for future annual report notif	ication)
For furth	er information c	oncerning this matter, please c	afl:	^3 -3
Derra L.	Moore Sr		904 334-2087	
	Name o	f Person	Area Code Daytime	: Telephone Number
Enclosed	is a check for th	ne following amount:		·
<b>\$25.</b> 0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	MAIL	ING ADDRESS:	STREET/COURD	ER 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

DERRA L. MOORE SR CONSTRUCTOR L.L.C.

(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 Co	2/13/2017	and conformed
Florida document number 1.17000247892	ompany were filed on	and assigned
	<b>~</b> ·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address.		ds, enter the name of the ne
Name of New Registered Agent:		<del> </del>
New Registered Office Address:		· · · · · · · · · · · · · · · · · · ·
	Enter Florida street addr	
	, F	`lorida
Non Designated Access Circumstance if about a Designation		Zip Code 
New Registered Agent's Signature, if changing Registered		
I hereby accept the appointment as registered agent of provisions of all statutes relative to the proper and confidence accept the obligations of my position as registered againg filed to merely reflect a change in the registered company has been notified in writing of this change.	omplete performance of my duties, c gent as provided for in Chapter 605	nd I am familiar with and , F.S. Or, if this document is
	If Changing Registered Agent, Signature	of New Designated Appet

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	Derra L. Moore, Sr.	952 Frost St. E.	■ Add
		Jacksonville, FL 32221	□ Remove
			□ Change
			Add
			☐ Remove
			Change
			Add
			□ Remove
		<del></del>	Change
			□ Add
			Remove
		<del> </del>	☐ Change
			☐ Remove
			☐ Change
			Add
			Remove
			Change

	<del></del>	
<del></del>		
	e specific and cannot be prior to date of filink does not meet the applicable statutory	(optional)  ng or more than 90 days after filing.) Pursuant to 605.020  y filing requirements, this date will not be listed a
record specifies a delayed one 90th day after the recor	effective date, but not an effect d is filed.	tive time, at 12:01 a.m. on the earlier o
December 13,	2017	. •
1///		
1/1	ignature of a member of authorized represei	niative of a member

Page 3 of 3

Filing Fee: \$25.00