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(Requestor's Name)

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(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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R. WHITE  
JAN 03 2020

2019 11 25 PM 3:45

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Smith Turlington 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:

James L Smith III

\_\_\_\_\_  
Name of Person

Smith Turlington Contracting, LLC

\_\_\_\_\_  
Firm/Company

3332 NW 133rd Street

\_\_\_\_\_  
Address

Gainesville, FL 32606

\_\_\_\_\_  
City/State and Zip Code

James@SmithTurlington.com

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

For further information concerning this matter, please call:

James L Smith III

615 767-4363  
at ( )

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |   |
|---|--|--|---|
| <input 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 checked="" 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**

2018. 125 PM 3:45

Smith Turlington 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 October 4, 2018 and assigned  
Florida document number L18000235079.

This amendment is submitted to amend the following:

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

n/a

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:**

3332 NW 133rd Street

**(Principal office address MUST BE A STREET ADDRESS)**

Gainesville, FL 32606

**Enter new mailing address, if applicable:**

3332 NW 133rd Street

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

Gainesville, FL 32606

**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:

3332 NW 133rd Street

*Enter Florida street address*

Gainesville

*City*

, Florida 32606

*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>	<u>Address</u>	<u>Type of Action</u>
M. MBR	Lillian Claire Spurling Smith	605 Chesterfield Way	<input checked="" type="checkbox"/> Add
		Nashville, TN 37212	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
M. MBR	Hillary Rae Turlington	3332 NW 133rd Street	<input checked="" type="checkbox"/> Add
		Gainesville, FL 32606	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

1. Adding both "Lillian Claire Spurling Smith" and "Hillary Rae Turlington" as "Managing Members" and 25.5% owners of "Smith Turlington Contracting, LLC" effective 2019.

2. Updating / Changing the office and mailing address of "Smith Turlington Contracting, LLC" to:

3332 NW 133rd Street

Gainesville, FL 32606

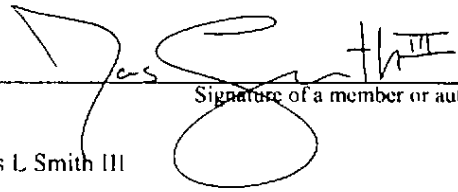
**E. Effective date, if other than the date of filing:** November 15, 2019 **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated November 15, 2019

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member  
  
James L. Smith III  
\_\_\_\_\_  
Typed or printed name of signee