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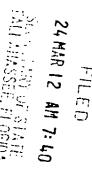
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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: The Renovators Gulf Coast, 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:
Heather Bryant Name of Person
The Handyman Company The Renovators Gulf Cost, L
2031 Scotland Drive
Clearwater, FL 33763 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
HPWNEY BYANT at 310 Std 7.5335  Name of Person Variance Telephone Number  at 310 Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certificate of Status}\$\Bigcup \text{\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)}\$\Bigcup \text{\$60.00 Filing Fee.}\$\Bigcup \text{\$60.00 Filing Fee.}\$\Bigcup \text{\$Certified Copy (additional copy is enclosed)}\$

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

ARTICLES OF O	RUANIZATION 2, Py
Ol	F MAR ILEO
(Name of the Limited Liability Compa) (A Florida Limited Liability Compa)	ny as it now appears on our records.  Jability Company  Any  and assigned
The Articles of Organization for this Limited Liability Company	were filed on Wild II
Florida document number 121000154876	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial	pility company here:
The new name must be distinguishable and contain the words "Limited Liab Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)	2031 Scotland Drve  Craructer FL 33763
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address here:	ce address on our records, enter the name of the new registered
Name of New Registered Agent:  New Registered Office Address:  Cloo	ther Bryant  2031 Scotland Drive  Enter Florida street address  City, Florida Zip Code
A surely Signature if changing Registered A	gent:

## 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
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