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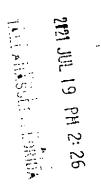
(Re	equestor's Name)	1		
(Address)				
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PICK-UP	WAIT	MAIL		
(Business Entity Name)				
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Certified Copies	_ Certificate	s of Status		
Special Instructions to	Filing Officer:			





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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Davis Brothers Framing, 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:	
MICHAEL DAYIS Name of Person	
Davis Brothers Framing Fim/Company	
3128 SW 18th Ave.	
Cape Coral, FL 33914 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
MICHOCI DOVIS at (239) U77-5817 Area Code Daytime Telephone Number	
Enclosed is a check for the following amount: \$\sum_{\text{S25.00 Filing Fee}} \sum_{\text{S30.00 Filing Fee}} \sum_{\text{S55.00 Filing Fee}} \sum_{\text{S60.00 Filing Fee}} \sum_{\text{Certificate of Status}} \sum_{\text{S60.00 Filing Fee}} \sum_{\text{Certificate of Status}} \sum_{\text{Certified Copy}} \sum_{Certified Copy	

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

iming
ty Company as it now appears on our records.) Limited Liability Company)
ompany were filed on 5 14 3031 and assigned
ited liability company here:
ited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
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office address on our records, enter the name of the new register
Enter Florida street address
Trues Timida sireet address
it

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 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	Michael Bavis	3128 SW 18th Ave	j∳∧dd
		Cape Coral, FL 33914	□ Remove
			X Change
MGR	Jamie Davis	107 SW 19th LN	□Add
		Cape Coral, FL 33991	□ Remove
			Change
MGR	Darlenc Davis	3128 SW 18th Ave	□ Add
		Cape Coral, FL 33914 =	Remove
			_ QAdd
		ਲੋੜ ਯੂ: **	: 26 □Remove
			□Change
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Fective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior tote: If the date inserted in this block does not meet the applica cument's effective date on the Department of State's records.	able statutory filing requirements, this date will not be listed a
	me, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ted <u>JUly 5</u>	me, at 12:01 a.m. on the earlier of: (b) The 90th day after the
11.00	me, at 12:01 a.m. on the earlier of: (b) The 90th day after the