

M01006001562

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

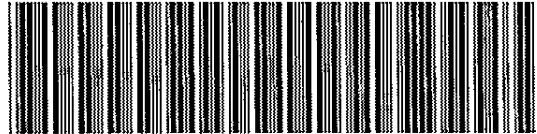
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RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
2006 OCT -2 AM 11:33  
TO AGENT ALICE  
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CT

a Wolters Kluwer business

CT

1203 Governors Square Blvd.  
Tallahassee, FL 32301-2960

850 222 1092 tel  
850 222 7615 fax  
www.ctlegalsolutions.com

October 2, 2006

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06 OCT -2 PM 1:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Department of State, Florida  
Clifton Building  
2611 Executive Center Circle  
Tallahassee FL 32301

Re: Order #: 6744679 SO  
Customer Reference 1: 16153-54763  
Customer Reference 2:

Dear Department of State, Florida:

Please obtain the following:

Ginn Lifestyle Homes, LLC (GA)  
Evidence of Amendment  
Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Ashley A Mitchell  
Fulfillment Specialist  
Ashley.Mitchell@wolterskluwer.com

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO  
FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

**SECTION I (1-3 must be completed)**

1. Name of limited liability company as it appears on the records of the Florida Department of State: Ginn Lifestyle Homes, LLC
2. Jurisdiction of its organization: GA
3. Date authorized to do business in Florida: 7/6/2001

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TALLAHASSEE, FLORIDA

**SECTION II (4-7 complete only the applicable changes)**

4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? 9/28/2006
5. New name of the limited liability company: Ginn Construction Company, LLC
6. If the amendment changes the period of duration, indicate new period of duration:  
n/a
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:  
n/a
8. If the amendment corrects any false statement, indicate the statement being corrected and the correction: n/a
9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

*Penny J. Farr*  
Signature of a member or the authorized representative of a member

Penny J. Farr

Typed or printed name of signee

**Filing Fee: \$25.00**

# Secretary of State

Corporations Division

315 West Tower

#2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

DOCKET NUMBER :062711000

PRINT DATE : 09/28/2006

FORM NUMBER : 218

MORRIS MANNING & MARTIN  
3343 PEACHTREE ROAD, #1600  
ATLANTA GA 303261044

## CERTIFICATE OF FACT

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

EFFECTIVE 09/28/06 GINN LIFESTYLE HOMES, LLC FILED ARTICLES OF AMENDMENT CHANGING THE NAME TO GINN CONSTRUCTION COMPANY, LLC.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence of the existence or nonexistence of the facts stated within.



Cathy Cox  
Secretary of State