

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (050)205-8842

Fax Number

: (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

CIESS:					
	OE055:	Gress:	oress:	GI-688:	aress:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CANV/NC, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

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Corporate Filing Menu

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### **COVER LETTER**

TO:		tration S ion of Co	ection orporations			
SUBJI	ECT:	CANV/N	CLLC			
			Name of Forei	gn Limited	Liability Com	pany
Dear S	ir or N	ladam:				
The en	closed	applicat	ion, certificate and fee(s)	) are submi	ned for filing.	
Please	retum	all corre	spondence concerning th	nis matter to	the following	<b>;</b>
Howard	d Stock	ing				
			Name of Person		<del></del>	
Fore Pr	roperty	Company	_			
			Firm/Company			
1741 V	'illage (	Center Cir	cle			
			Address			
Las Ve	gas, No	vada 891	34			
			City/State and Zip Con	de	- <del></del>	
Hstock	ing@F	oreProper	y.com			
E-m	ail add	iress: (to	be used for future annua	al report no	tification)	
For fin	rther in	ı formatic	on concerning this matter	r. please cai	11:	
	d Stock			702 at (	 562-60	50
		Name	of Person		Code & Dayti	me Telephone Number
	STR	EET/CO	OURIER ADDRESS:		MAI	LING ADDRESS:
Registration Section			Registration Section			
Division of Corporations			Division of Corporations P.O. Box 6327			
Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301				hassee, Florida 32314		
Enclos			for the following amous \$30 Filing Fee & Certificate of Statu	<b>\$55</b>	Filing Fee & sified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy
CRSTO	55 (12/1	45				Collinso Aobl

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

#### SECTION I (1-4 must be completed)

Name of limited liability Company as it     State: CANV/NC LLC	t appears on the records of the Florida Department of
2. The Florida document number of this limited	d liability company is: M06000000750
3. Jurisdiction of its organization:	
4. Date authorized to do business in Florida:	22/01/2006
SECTION II (5-9 complete only the applicab	ble changes)
5. New name of the limited liability company:	Fore Construction LLC
	(must contain "Limited Liability Company, ""L.L.C.," or "LLC.")
the new registered agent and/or the new register  Name of New Registered Agent:  New Registered Office Address:	Ener Florida Street Address
	City Florida Zip Code
comply with the provisions of all statutes relative duties, and I am familiar with and accept the observed for in Chapter 605, F.S. Or, if this doc	Registered Agent: agent and agree to act in this capacity. I further agree to ive to the proper and complete performance of my obligations of my position as registered agent as ocument is being filed to merely reflect a change in the t the limited liability company has been notified in

6/10/2015 3:27:53 PM From: To: 8506176383( 4/5 )

Title/ Capacity	Name	Address	Type of Action
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			Remove Remove
			Remove O
			D Add
			Remove
aforementioned	amendment(s), duly authentice or the law of which this entity	than 90 days old, evidencing the cated by the official having custo is organized. - the authorized representative	
	Thomas I. Johnston		
	Typed or prin	nted name of signce	<del></del>

Filing Fee: \$25.00

# SECRETARY OF STATE



#### CERTIFICATE OF NAME CHANGE

I, BARBARA K. CEGAVSKE, the duly qualified and elected Nevada Secretary of State, do hereby certify that on August 4, 2014, a Certificate of Amendment to its Articles of Organization changing the name to FORE CONSTRUCTION LLC, was filed in this office by CANV/NC, LLC. Said change of name has been made in accordance with the laws of the State of Nevada and that said Certificate of Amendment is now on file and of record in this office.



Certified By: Christine Rakow Certificate Number: C20150809-2242 You may verify this certificate online at http://www.nvsos.gov/ IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on June 9, 2015.

Barbara K. Cegavske
BARBARA K. CEGAVSKE
Secretary of State