Resubmission, Please keep file date of 11/06/2018

# Florida Department of State

**Division of Corporations Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000320298 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (614)280-3338

: (954)208-0845 Fax Number

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

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LETOURNEAU CLEARING LLC

Certificate of Status	0
Certified Copy	I
Page Count	03
Estimated Charge	\$55.00

AL	
رايدية. ماريدية	1

Electronic Filing Menu Corporate Filing Menu

Help

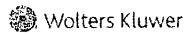
### **FAX COVER SHEET**

TO	
COMPANY	
FAX NUMBER	18506176383
FROM	Kimberly Laughrey
DATE	2018-11-15 14:41:25 CST
RE	Resubmission: 11243347 - LetourneauEnterprises, LLC

#### COVER MESSAGE

Robert Sholl
Associate Fulfillment Specialist
Global Fulfillment Operations
CT Corporation

Team 614-280-3338
GlobalFulfillmentTeam@wolterskluwer.com



1209 Drange Street Wilmington, DE 19301, www.wolterskluwer.com

Confidentiality Notice: This email and its attachments (it and) contain confidential information of the sender. The information is introduced poly in the use by the direct addressess of the original sender of this email, if you are not an intended recipied to enginal sender (or responsible for delivering the message to such person), you are hereby notified that any inview, disclosure, copying, distribution or the taking of any action in reliance of the contents of red anarmous to the expectly prohibited. It you have tone you this email in coor, places immadistry, posts, the sender as the address shown herein any agreemently delete any copies of this email (agost or paper) in your point (or it with the

# 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)

1. Name of limited liability Company as it appears on the records of the Florida Department of
State: LETOURNEAU CLEARING LLC
Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  Solution Solutio
2. The Florida document number of this limited liability company is: M18000009881
3. Jurisdiction of its organization:  Delaware  4. Date authorized to do business in Florida: 11/01/2018
4. Date authorized to do business in Florida: 11/01/2018
SECTION II (5-9 complete only the applicable changes)
5. New name of the limited liability company:     n/a - changing alternate name
(must contain "Limited Liability Company, " "L.L.C., or LLC.)  Letourneau Field Services LLC
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")
6. If amending the registered agent and/or registered officer 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:  Enter Florida Street Address
. Florida 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 the amendment changes person, title or capacity in accordance with 605,0902 (1)(e), indicate that change:					
tle/Capacity	Name	<u>Address</u>	Type of Action		
			DAdd		
			Remo		
			Add		
			Remo		
			[] Renov		
			Add		
			Remov		
			Add		
			Remo		
aforementioned am	icate, if required; no more than 90 day iendment(s), duly authenticated by the the law of which this entity is organize	official having custody of record	Is in the		
	Signature of the	authorized representative			

Filing Fee: \$25.00



EFFICIENT & FAMILY-DRIVEN CLEARING SOLUTIONS

November 15, 2018

Attn: Florida Department of State

Re: Letourneau Enterprises, LLC state registration

Letourneau Enterprises, LLC recently registered as a Foreign Limited Liability Company. Because this company name wasn't available, we registered with the Alternate Name of Letourneau Clearing LLC. At this time, I, Mark Letourneau, Managing Member of Letourneau Enterprises, LLC am requesting, and consent to, the change of the Alternate Name to Letourneau Field Services LLC.

Thank you,

Mark A. Letourneau

President

Letourneau Enterprises, LLC



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "LETOURNEAU ENTERPRISES, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE THIRTIETH DAY OF OCTOBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

5780690 8300

SR# 20187402088

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203714828

Date: 10-30-18