

Division of Corporations

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 Division of Corporations
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To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : HARRISON, SALE, MCCLOY & THOMPSON
Account Number : 076630000526
Phone : (850)769-3434
Fax Number : (850)769-6121

DIVISION OF CORPORATIONS
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

BAY-CAL, LLC

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
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DIVISION OF CORPORATIONS

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bay-Cal, 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:

Stephanie

(Name of Person)

Harrison, Sale, McCloy & Thompson, Chtd.

(Firm/Company)

304 Magnolia Avenue

(Address)

Panama City, Florida 32401

(City/State and Zip Code)

For further information concerning this matter, please call:

Stephanie

(Name of Person)

at (850) 769-3434

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$30.00 Filing Fee &
Certificate of Status

\$55.00 Filing Fee &
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(additional copy is enclosed)

\$60.00 Filing Fee,
Certificate of Status &
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(additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FEB 06, 2006 18:05

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Bay-Cal LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on July 27, 2005 and assigned document number LD5000075271

SECOND: This amendment is submitted to amend the following:

The Managers of the LLC are as follows:

Andrew L. Ersek

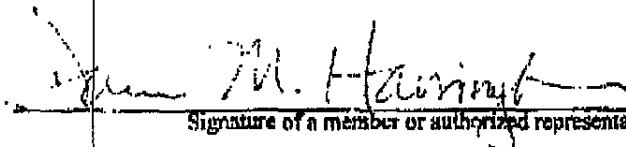
Marion A. Ersek

Steven L. Harrington

Tammi M. Harrington

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DIVISION OF CORPORATIONS

Dated February 6, 2006



Signature of a member or authorized representative of a member

Tammi M. Harrington

Typed or printed name of signer

Filing Fee: \$25.00