## 

(Requestor's Name)	
(Address)	
(Address)	<u>-</u> -
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of St	atus
Special Instructions to Filing Officer:	





09/21/06--01035--020 \*\*25.00

## **COVER LETTER**

Division of Co			٠.
SUBJECT:	Crane Ent	nited Liability Company)	
The enclosed Articles of	f Amendment and fee(s) are sub	nitted for filing.	
Please return all corresp	oondence concerning this matter	o the following:	
	Christopher	L. Cone	
_		irm/Company)	
	1909 Fault	Drive (Address)	2006 S SECR TALLA
_	Tallahasse (City	F1 32303 tate and Zip Code)	EP 21 P. ETARY OF HASSEE.
For further information	concerning this matter, please o	11:	PILED 2006 SEP 21 PM 1: 20 SECRETARY OF STATE ALLAHASSEE.FLORIDA
	(Name of Person)	at ()	ephone Number)
Enclosed is a check for the	e following amount:		
S25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy C (additional copy is enclosed) C	3 \$60.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)

MAILING ADDRESS:

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	(A Fiorida Ellinica Elabatity Company)			
FIRST:	The Articles of Organization were filed on 4-13-06 and assigned document number Location 28543			
SECOND:	This amendment is submitted to amend the following:			
	Amend to Change name to			
	Crane Enterprises, LLC	TALLAH	2006 SEP	
		SSEE	2	1
		FLO	P.H.	
		RIDA	20	
				, -
Dated	9-21-06	~· <del>*</del>	- 1-	-
	Chris Cranl			
	Signature of a member or authorized representative of a member  Chris to pher L. Crane  Typed or printed name of signee			••

Filing Fee: \$25.00