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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

JUL 1 6 2009

EXAMINER

COVER LETTER

SUBJECT: Copper 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:	
Edward Darragh	
Name of Person	
Edward Darragh	
Firm/Company	
5353 North Federal Highway #405	
Address	
Ft. Lauderdale, FL 33308	
City/State and Zip Code	
edwarddarragh@aol.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Edward Darragh at (_954_) 491-7500	
Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional	itus &

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Copper LLC			
(<u>Name of the Limited Liability</u> (A Florida)	Company as it now appea Limited Liability Company)	rs on our records.		
The Articles of Organization for this Limited Liability C Florida document number L0000004181	Company were filed on	04/11/2000	and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lim	ited liability company her	<u>re</u> :		
The new name must be distinguishable and end with the wor "L.L.C."	rds "Limited Liability Compa	any," the designation "LL	.C" or the abbrevi	 atio
Enter new principal offices address, if applicable:				_
(Principal office address MUST BE A STREET ADDI	RESS)		9	
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				- TT -
Enter new mailing address, if applicable:			ာ ကို ကို	Ē
(Mailing address MAY BE A POST OFFICE BOX)			3 89	Q
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B. If amending the registered agent and/or registered agent and/or the new registered office add		our records, <u>enter th</u>	e name of the	nev
Name of New Registered Agent:		······································	······································	
New Registered Office Address:				
	En	ter Florida street addre	ess	
		, Florida		
	City		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 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

Title <u>Name</u> <u>Address</u> **Type of Action MGRM** Karen Karam 14600 32 Mile Road ☐ Add Washington, MI 48095 ✓ Remove Anthony A. Karam MGR 13498 Butler ✓ Add Sterling Heights, MI 48313 Remove ☐ Add Remove Add Remove \square Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Changing this Limited Liability Company to a Manager Managed Company instead of a Member Managed Company July 10 Dated Signature of a member authorized representative of a member Karen Karam Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00