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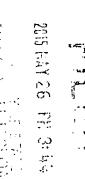
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COVER LETTER

	stration Sec sion of Corp					
SUBJECT:	MACHINE	CONTROL REPAIR, LLC				
SUBSECT.		Name of Limi	ted Liability Company			
The enclosed	Articles of /	Amendment and fee(s) are sub	mitted for filing.			
Please return a	all correspo	ndence concerning this matter	to the following:			
		RICHARD B CROUSE				
			Name of Person			
		GVC FINANCIAL INC				
			Firm/Company			
978 DOUGLAS AVENUE STE 102						
			Address			
		ALTAMONTE SPRINGS,	FL 32714		Sec. 2015	
			City/State and Zip Code			Emesterna 6
		ContactUs@gvc-financial.co	om to be used for future annual report notifice	ation)	100	المالية عن المالية المالية عن المالية
For further inf	formation co	oncerning this matter, please ca	·] 발 수
Richard B Cr			407 331-0678 at ()			,
	Name of	f Person	Area Code Daytime T	elephone Number	ξ., ⇒ Σ ¹¹	
Enclosed is a	check for th	ne following amount:				
■ \$25.00 Fi	ling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (e of Status &	

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

MACHINE CONTROL REPAIR, LLC

The Articles of Organization for this Limited Liability Company were filed on 12/31/2001 and assigned Florida document number L02000000499 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices 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) B. If amending the registered agent and/or registered office 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 Lip Code Zip Code	(<u>Name of the Limited Liability</u> (A Florida I	y Company as it now appears on our records.) Limited Liability Company)	
A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the neregistered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address		ompany were filed on 12/31/2001	and assigned
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices 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) B. If amending the registered agent and/or registered office 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	This amendment is submitted to amend the following:		
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Enter Florida street address Florida	Name of New Registered Agent:		
Florida	New Registered Office Address:		
City , Florida Zip Code		Enter Florida street address	
City Zip Code			I
		City	Zip Code
New Registered Agent's Signature, if changing Registered Agent: Lhoraby account the appointment as registered agent and agree to get in this canacity. I further agree to comply with the			

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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added ',or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGRM	HARDEE, LARRY B	920 BROGDEN DR	Add
		CLERMONT, FL 34711	Remove
		·	☐ Change
MGR	HARDEE, AUSTIN T.	920 BROGDEN DR	□ Add
		CLERMONT, FL 34711	■ Remove
			Change
MGR	HARDEE, DONALD R.	8903 LAKE MABLE DR	
		ORLANDO, FL 32836	Rēmove
			☐ Chànge
MGRM	HARDEE, PAULA M.	920 BROGDEN DR	S S S S S S S S S S S S S S S S S S S
		CLERMONT, FL 34711	ည် □ Remove
			Change
			Add
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Page 3 of 3

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