# LD2000017722

(Requestor's Name)					
(Address)					
,					
(6.11					
(Address)					
·					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
•					
(Business Entity Name)					
(Dusiness Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
·					

Office Use Only



100133059571

07/18/08--01031--002 \*\*25.00

OB JUL 18 AM II: 55

M. D. JUL 2 1 2008

## MAY, MEACHAM & DAVELL

A PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS
SUITE 2602
ONE FINANCIAL PLAZA
FORT LAUDERDALE, FLORIDA 33394-1697

PAUL M. MAY (1954-1999)
ROBERT C. MEACHAM
WILLIAM C. DAVELL
CHRISTOPHER D. BARBER
CAROLYN B. BROMBACHER
JEFFREY S. WOOD
SCOTT C. COCHRAN

FORT LAUDERDALE (954)763-6006 MIAMI (305) 944-8291 TELEFAX (954) 764-5367 WWW.MMDPA.COM

July 17, 2008

### Via Federal Express

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

Re:

United Firespray, LLC

Florida Document Number: L02000017722

### Gentlemen/Ladies:

Enclosed please find the following to file:

- 1. Original Articles of Amendment to Articles of Organization of United Firespray, LLC; and
- 2. Our firm's check in the amount of \$25.00 for the filing fees.

Should you have any questions or comments, please feel free to call the undersigned.

Very truly yours,

Kristy Miller, CLA Certified Legal Assistant

nisty Miller

:klm Enclosures

# **COVER LETTER**

TO: Registration Sec Division of Corp			
SUBJECT: UNITED	FIRESPRAY, LLC		
		ted Liability Company)	_
The enclosed Articles of A	mendment and fee(s) are subr	nitted for filing.	
Please return all correspon	dence concerning this matter t	to the following:	
	William C. Davell, Esquire		
		(Name of Person)	
	MAY, MEACHAM & DAV		
		(Firm/Company)	
	One Financial Plaza, Suit	e 2602	
		(Address)	
	Fort Lauderdale, Florida	33394	
		(City/State and Zip Code)	
For further information co	oncerning this matter, please ca	all:	
William C. Davell, Esqu	ire	at ( 954 ) 763-6006	
(Name o	f Person)	(Area Code & Daytime To	elephone Number)
			•
Enclosed is a check for th	e following amount:		
☑ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
R <b>e</b> gistr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns · Circle

FILED

# ARTICLES OF AMENDMENT 08 JUL 18 AM II: 55 TO SECRETARY OF STATE ARTICLES OF ORGANIZATION LAHASSEE FLORIDA OF

UNITED FIRESPRAY, LLC				
(Name of the Limited Lin (A Flo	bility Company as it now appears on rida Limited Liability Company)	our records.)		
The Articles of Organization for this Limited Liabi	lity Company were filed on July 15,	2002 and assigned		
Florida document number L02000017722	·			
This amendment is submitted to amend the followi	ng:			
A. If amending name, enter the new name of th	e limited liability company here:			
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company,"	the designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable	e:			
(Principal office address MUST BE A STREET A	IDDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO	<u></u>			
B. If amending the registered agent and/or registered agent and/or the new registered offic		records, <u>enter the name of the new</u>		
Name of New Registered Agent:				
New Registered Office Address:				
	(Enter Florida street address)			
	(Citv)	, 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 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>T</u>	Type of Action		
MGR	Randy McLoughlin	3005 SW 2nd Avenue, #101 Fort Lauderdate, Florida 33315		Add Remove		
MGR	Matthew Deslippe	3201 SW 2nd Avenue Fort Lauderdale, Florida, 33315	6(7) 6(1)	Add Remove		
				Add Remove		
				Add Remove		
				Add   Remove		
<del></del> ,				Add Remove		
 - - -		er change(s) here: (Attach additional sheets, if necessar)	TALLA	OB JUL 18 AM 11:55 SECRETARY OF STATE	TO	
Dated Jub	THUIS	, 2008  7 MM a member or authorized representative of a member				
	Robert W. Laffe	Typed or printed name of signee				

Page 2 of 2

Filing Fee: \$25.00