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JAN 20 2017 S. YOUNG SECRETARY OF STATE FALLAHASSEE. FLORID



ROBERT KIT KOREY, P.A. KOREY, SWEET, MCKINNON & SIMPSON

Attorney and Counselors at Law

Robert Kit Korey, P.A. Jeffrey C. Sweet Noah C. McKinnon, Jr., P.A. Scott E. Simpson, P.A Abraham McKinnon R. Kevin Korey

Suite A, Granada Oaks Professional Building 595 West Granada Boulevard Ormond Beach, Florida 32174 Telephone (386)677-3431 Telefax (386)673-0748

VIA FEDERAL EXPRES

January 18, 2017

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

RE: Amendment to Articles of Organization

Madam:

Enclosed please find the Amendment to the Articles of Organization for filing for the following corporation

Valiant Equipment, L.L.C.

I have enclosed a check in the amount of \$55.00 payable to the Department of State to cover filing fees and certified copy and a return self-addressed envelope for your convenience.

Should you have any questions regarding these enclosures, please do not hesitate to contact me.

Very truly yours,

Carleen R

Legal Assistant to Robert Kit Korey

Enclosures

COVER LETTER

Division of Co.	rporations			
SUBJECT: Valiant Eq	uipment, L.L.C			
	Name of Limi	ted Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
	ondence concerning this matter	-		
Trouse return an eorresp.	ondende concerning into marie.	io and tomo wing.		
	Robert Kit Korey, Esq.			
		Name of Person		
	Robert Kit Korey, PA			
		Firm/Company		
	595 W. Granada Blvd. Ste.	. A	·	四部
		Address		H AM
	Ormond Beach, FL 32174			JAN 19 PH 2: 17
	<u> </u>	City/State and Zip Code		SEE, FLORIDA 9 PH 2: 17
	bill@valiantequipment.com		- TA	V. 0.
	E-mail address: (to be used for future annual report r	notification)	- 1
For further information	concerning this matter, please ca	all:		,,,
Robert Kit Korey		386-677-	3431 x 222	
Name	of Person	Area Code Day	time 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 & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee Certificate of Sta Certified Copy (additional copy is e	atus &
MAII	LING ADDRESS:	STREET/COU	URIER ADDRESS:	

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Valiant Equipment, L.L.C		
(<u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our records.) nited Liability Company)	
The Articles of Organization for this Limited Liability Com	pany were filed on 10/08/2003	and assigned
Florida document number 20-0391033		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company here:	
Valiant Modular, L.L.C.		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u> </u>	T APPE
		2
		7 S S S S S S S S S S S S S S S S S S S
Enter new mailing address, if applicable:		T FO
(Mailing address MAY BE A POST OFFICE BOX)		333
		- 132 A
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		nter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:		, , , .
	Enter Florida street address	
	, Florid	
	City	Zip Code
Now Registered Agent's Signature, if changing Registered Ag	aent:	

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Change
			□ Add
			☐ Remove
			Change
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			Add
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			□ Change

Effective date, if other than the date of filing: (If an effective date is itself, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the poth day after the record is filed.		<u>, , , , , , , , , , , , , , , , , , , </u>	
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Signature of a mamber or authorized convecentative of a mamber		mest	
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		B: 11 Startevic Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00