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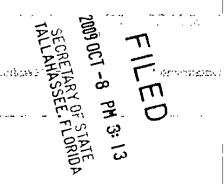
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C. LEWIS

0CT - 9 2009

EXAMINER

## · COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Chase Components, 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:
Cristal Donailli Name, of Person
Chase Components LLC
647 Arnau Drive
New Smyrna Beach FL 32168
Cristal echasecomponents.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Cristal Dongilli at (386 426-1367  Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Solution} \text{Solution} \text{Filing Fee & Certificate of Status} \text{Solution} \text{Solution} \text{Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{Solution} \text{Solution} \text{Filing Fee & Certified Copy (additional copy is enclosed)} \text{Solution} \text{Solution} \text{Filing Fee, Certified Copy (additional copy is enclosed)} \text{Solution} \text{Filing Fee, Certified Copy (additional copy is enclosed)} \text{Solution} \text{Filing Fee, Certified Copy (additional copy is enclosed)} \text

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

FILED 2009 OCT -8 PM 3: 13

	0.	CTATE	
Chase Com	ponents, L	L C SECRETARY OF STATE TALLAHASSEE. FLORIDA	
( <u>Name of the Limited Liab</u> (A Flor	ility Company as it now appears ida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Florida document number <u>LO300039</u>	ty Company were filed on 10	117103 and assigned	
This amendment is submitted to amend the following	g:		
A. If amending name, enter the new name of the	limited liability company here	:	
The new name must be distinguishable and end with the 'L.L.C."	words "Limited Liability Compar	y," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AL	DDRESS)		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX	2		
B. If amending the registered agent and/or registered agent and/or the new registered office a		ur records, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
-	City	, Florida Zip Code	
	~··,	arp come	

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> **Address Type of Action** MGRM Jerry Dongilli se MGR Jeffrey Dongilli Remove Remove ☐ Add Remove  $\neg$  Add Remove ∐Add Remove  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated or authorized representative of a member

Page 2 of 2

yped or printed name of signee

Filing Fee: \$25.00