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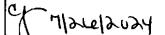
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COVER LETTER

TO:	Registration Sec Division of Cor			
Seriez	R&D Steel	Erectors, LLC		
SO DJEN		Name of Lim	ited Liability Company	
The encl	losed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		Timothy P. Schendel		
			Name of Person	· · · · · · · · · · · · · · · · · · ·
		R&D Steel Erectors, LLC		
			Firm Company	
		155 West Brownlee Street		
			Address	
		Starke, FL 32091		
		TimSchendel@yahoo.com	City State and Zip Code	
		E-mail address: (to be used for future annual repo	rt notification)
For furth	ner information co	oncerning this matter, please c	all:	
Timothy	y P. Schendel		318 542-22	
	Name o	f Person	Area Code T	aytime Telephone Number
Enclosed	d is a check for th	ne following amount:		
■ \$25	.00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	Sou.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres	s:	Street Addre	55:

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

Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2074, " 18 / 7: 34

R&D STEEL ERECTORS, LLC				
(<u>Name of the Limited Lia</u> (A Flo	bility Compa rida Limited I	iny as it now appears Liability Company)	on our records,)	
The Articles of Organization for this Limited Liabilit Florida document number $\frac{L03000049452}{L03000049452}$	y Company	were filed on Dece	ember 02, 2003	_ and assigned
This amendment is submitted to amend the following	! :			
A. If amending name, enter the new name of the	lim <u>ited li</u> ab	ility company her	<u>e</u> :	
The new name must be distinguishable and contain the words "	Limited Liabil	lity Company," the des	ignation "LLC" or the abbr	eviation "L.L.C,"
Enter new principal offices address, if applicable:	155 West Brownlee Street			
(Principal office address MUST BE A STREET AD	DRESS)	Starke, FL 32091		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<u>.</u>			
B. If amending the registered agent and/or registo agent and/or the new registered office address her		address on our rec	cords, <u>enter the name</u>	of the new register
Name of New Registered Agent:	mothy P. Sch	nendel	·	
New Registered Office Address: 15	5 West Brow	vnlee Street		
·		Enter Floria	la street address	
St	arke		, Florida _ ^{FL 3}	2091
		Cin		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 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>	<u>Name</u>	Address	Type of Action
MGR	Darryl D. Geiger	308 Fleming Dr., Fleming Island, FL 32003	□Add
			≡ Remove
			□ Change
MGR	Timothy P. Schendel	155 West Brownlee St. Starke, F1, 32091	= Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🖂 Add
			□ Remove
		·	
			□Add
			□Remove
		 	□Change
			🗆 Add
			□Remove
			□Change

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Filing Fee: \$25.00