

# **2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L04000003845

**FILED**  
**Jun 24, 2011**  
**Secretary of State**

**Entity Name:** ABLE RAILING & WELDING LLC

**Current Principal Place of Business:**

206 STOKES AVE.  
SUITE 2 A & B  
FORT WALTON BEACH, FL 32548

**New Principal Place of Business:**

**Current Mailing Address:**

206 STOKES AVE.  
SUITE 2 A & B  
FORT WALTON BEACH, FL 32548

**New Mailing Address:**

**FEI Number:** 56-2427832

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HAMRICK, ROBERT E  
4 INDIAN BAYOU DRIVE  
DESTIN, FL 32541 US

**Name and Address of New Registered Agent:**

HAMRICK, MYRNA R PIERCE  
4 INDIAN BAYOU DRIVE  
DESTIN, FL 32541 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:** MYRNA RENEE PIERCE HAMRICK

06/24/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** HAMRICK, MYRNA R PIERCE  
**Address:** 4 INDIAN BAYOU DRIVE  
**City-St-Zip:** DESTIN, FL 32451 US

**Title:** MGR  
**Name:** HAMRICK, ROBERT H  
**Address:** 4 INDIAN BAYOU DRIVE  
**City-St-Zip:** DESTIN, FL 32548 US

**Title:** MGR  
**Name:** HAMRICK, ROBERT E  
**Address:** 4 INDIAN BAYOU DRIVE  
**City-St-Zip:** DESTIN, FL 32548 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** MYRNA RENEE PIERCE HAMRICK

MGR

06/24/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date