

L04000078308

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

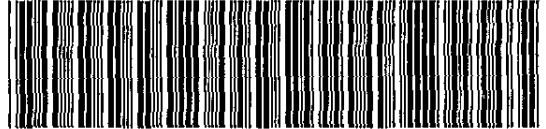
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TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

Ironclad Brothers 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:

DR. MARCEL A. ANDERSON

(Name of Person)

(Firm/Company)

9645 N.W. 19 Place

(Address)

Sunrise FL 33322

(City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Person)

at ()

(Area Code & Daytime 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 Status &
Certified Copy
(additional copy is enclosed)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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

Iron CAD Brothers

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on Oct 25 04 and assigned document number ~~6000~~ L04000076304

SECOND: The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:

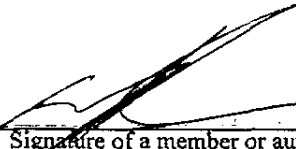
DR. Marcel A Anderson M4RM
9645 NW 19 Place
Sunrise FL 33322

is being added to this company.

Dated

12/13/

04


Signature of a member or authorized representative of a member

Ewen Anderson

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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