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SECRETARY OF STATE
TALLAHASSEE, FLORINA

D. BRUCE

DEC - 9 2008

**EXAMINER** 

## **COVER LETTER**

Division of Co	rporations			
SUBJECT: Tracks	, Wheels and Steel L	LC		Ŧ.
	<u> </u>	ited Liability Company)		
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	•	
Please return all correspondent	ondence concerning this matter	to the following:		
	Ron Massa		·	
		(Name of Person)		
	RMC Total Jobsite Deve	lopment LLC		
		(Firm/Company)		•
	7829 CR 248 B			08 350 80
		(Address)		
	Lake Panasoffkee, FL 33	1538		FILED C-8 PM FARY OF S ASSEE, FL
	Lake Fallasolikee, i L 30	(City/State and Zip Code)		型名 。 一
•				FEO.
For further information	concerning this matter, please c	all:		
Robin Massa		at ( 352 ) 748-3235		Q)
	of Person)	(Area Code & Daytime T	elephone Numb	er)
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)	Certifie	ate of Status &

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

TO:

**Registration Section** 

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle

STREET/COURIER ADDRESS:

2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tracks, Wheels and Steel LLC		
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our	records.)
(A Florida Diffille	a Diability Company)	
The Articles of Organization for this Limited Liability Compa	any were filed on 11/08/2004	and assigned
Florida document number L04000081417		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	iability company here:	
The new name must be distinguishable and end with the words "L	imited Liability Company "the d	esignation "SI (I/6") or the abbreviation
"L.L.C."	minus Diability Company, and a	CO CO CONTRACTOR CONTR
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		<del>- 2 - 2</del>
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered		rds, enter the name of the nev
registered agent and/or the new registered office address b	<u>iere</u> :	
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter Flori	da street address)
		Florida
	(City)	(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 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 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>	Name	<u>Address</u>	Type of Action
MGRM	Jason Massa	6596 35 Lane Vero Beach 32966	Add Remove
MGRM	Robin Massa	7829 CR 248 B Lake Panasoffkee. FL 33538	Add Remove
			Add Remove
D. If amendi	ng any other information, enter chang	e(s) here: (Attach additional sheets, if nec	SECR
			FILED OEC -8 PH II: EPINARY DE STA VIII/SSEN, FLORA
Dated Decem	nber 4 , 2008		DE S
-	Landon Massa	or authorized representative of a member	
-	Typed	or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00