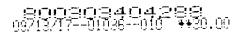
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J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Walts Wrecke	of Limited Liability Company
The enclosed Articles of Amendment and fee(s) a	re submitted for filing.
Please return all correspondence concerning this r	
Wa	Her H. Bryan DR Name of Person
Perryi	Weder Service LC Firm/Company
	Address
_ Jacks	Son Ville FL 32236 City/State and Zip Code The White Son D world Slive tak for d. Compress: (16) be used for future annual report notification)
Henrife E-mail add	ress: (10) be used for future annual report notification)
For further information concerning this matter, ple	 ase call:
Jennifer Johnson Name of Person	at (386) 362 1112— Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
S25.00 Filing Fee S30.00 Filing Fee Certificate of Sta	

MAILING ADDRESS: Registration Section Division of Corporations STREET/COURIER ADDRESS: Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Walts h	Drecker So	ervice	LLC		
(Name of the Lim	ited Liability Company (A Florida Limited Lial	as it now appears or pility Company)	i our records.)		-
The Articles of Organization for this Limited I Florida document number LO40008	1	ere filed on	11/23/200	<u> </u>	assigned
This amendment is submitted to amend the fol	 lowing:				
A. If amending name, enter the new name	_	v company here:			
The new name must be distinguishable and contain the	words "Limited Liability	Company," the desig	nation "LLC" or the	abbreviation	"L.L.C."
Enter new principal offices address, if appli	 cable:	_		T S	4 ¦
(Principal office address MUST BE A STRE	ET ADDRESS)			11 -0 2 - 2 2 - 2	- 1221 sets. 1225 sets.
	-			21. C	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
Enter new mailing address, if applicable:	_	<u> </u>		<u> </u>	<u> </u>
(Mailing address MAY BE A POST OFFICE	<u> </u>	_			
B. If amending the registered agent and registered agent and/or the new registered of		e address on ou	ır records, <u>ent</u>	er the nam	e of the nev
Name of New Registered Agent:					
New Registered Office Address:		Enter Florida	street address		
			, Florida _		
		City		Zip Cou	te
New Registered Agent's Signature, if changing					
I hereby accept the appointment as register provisions of all statutes relative to the proj					

If Changing Registered Agent, Signature of New Registered Agent

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.

	ing Authorized Person(s) authoried from our records:	 zed to manage	enter the title, name, and address of each p	person being added
MGR =				
<u>Title</u>	Name	Ac	<u>ldress</u>	Type of Action
MGR Perry Wricker:		rvice, LC	1057 Morning Stroll un	
		_	1057 Morning Stroll un dackson ville, FL 322	<mark>1</mark> □ Remove
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Page 2 of 3

•	enter change(s) here: (Attach additional sheets, if n	
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ective date, if other than the date of a effective date is listed, the date must be spete: If the date inserted in this block document's effective date on the Department.	exitic and cannot be prior to date of filing or more than 90 days a es not meet the applicable statutory filing requirements.	ptional) fier tiling.) Pursuant to 605.020 this date will not be listed a
record specifies a delayed effe he 90th day after the record is	ctive date, but not an effective time, at 12:0 s filed.	1 a.m. on the earlier c
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Signat	ure of a member or authorited representative of a member	
		7. Z
walter H.	3ryan 12 Typed of printed name of signee	ည်း တို့

Page 3 of 3

Filing Fee: \$25.00