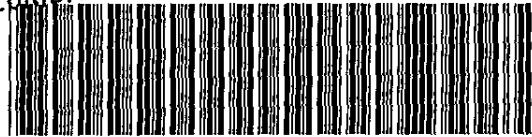


LOS 00004/001

2005 MAY 16 P 12:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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LAW OFFICES
NEILL, GRIFFIN, TIERNEY, NEILL & MARQUIS

CHARTERED

311 SOUTH SECOND STREET

SUITE 200

FORT PIERCE, FLORIDA 34950

RICHARD V. NEILL*
CHESTER B. GRIFFIN*
J. STEPHEN TIERNEY, III
RICHARD V. NEILL, JR.*
RENÉE MARQUIS-ABRAMS*
MICHAEL KURTH

*BOARD CERTIFIED WILLS, TRUSTS & ESTATES LAWYER
*BOARD CERTIFIED TAXATION LAWYER
*BOARD CERTIFIED CIVIL TRIAL LAWYER

May 13, 2005

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POST OFFICE BOX 16
FORT PIERCE, FL 34954
TELEPHONE (772) 484-8800
FAX (772) 484-8800
SECRETARY OF STATE
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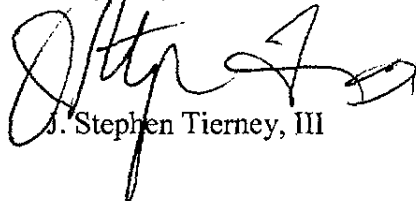
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: Atlantic Precision LLC

Enclosed please find Articles of Correction in regard to Atlantic Precision, LLC along with our firm check in the amount of \$25.00 in payment of the filing fee.

Thank you for your assistance.

Very truly yours,


J. Stephen Tierney, III

JST/jw
Enclosure

**ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

FILED

2005 MAY 16 P 12:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The name of the limited liability company is:
ATLANTIC PRECISION, L.L.C.

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)



Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

The incorrect statement is that the mailing address of the LLC is 2897 SE

Monroe Street, Stuart, FL. There is no mail receptacle at that address.

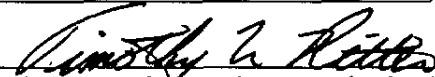
The correct address should be 2513 Lightlewood Lane, Ft. Pierce, FL 34946

OR



Was defectively signed. The manner in which the document was defectively signed and the appropriate correction is as follows:

Dated: _____



Signature of a member or authorized representative of a member

Timothy W. Ritter

Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)