

L06000007353

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

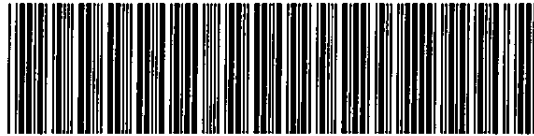
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07 MAR 29 PM 12:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

M. Ouligan MAR 30 2007

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Schmitt Labor Relations Consulting, 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:

Karl Schmitt

(Name of Person)

Schmitt Labor Relations Consulting, LLC

(Firm/Company)

6214 East 113th Avenue

(Address)

Temple Terrace, FL 33617

(City/State and Zip Code)

For further information concerning this matter, please call:

Karl Schmitt

(Name of Person)

at (

813

) 985-6148

(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)

**MAILING ADDRESS:**

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

**STREET/COURIER ADDRESS:**

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

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

**FILED  
07 MAR 29 PM 12: 28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

Schmitt Labor Relations Consulting, LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on January 23, 2006 and assigned document number L06000007353.

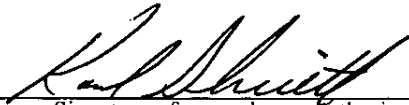
**SECOND:** This amendment is submitted to amend the following:

Name Change:

From: Schmitt Labor Relations Consulting, LLC

To: Schmitt Labor, LLC

Dated March 26, 2007.



Signature of a member or authorized representative of a member

Karl Schmitt

Typed or printed name of signee

**Filing Fee: \$25.00**