106000007449				
(Requestor's Name) (Address)				
(Address) (City/State/Zip/Phone #)	200075945322			
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	06/08/0601019003 **25.00 6 JUN - 8 AM 10: ALLAHASSEE. FLO			
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Office Use Only				

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## **COVER LETTER**

TO: Registration Section **Division** of Corporations

SUBJECT:	West Dig Equipment 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:

Rence Lowester (Name of Person) FILED FILED West Dig Equipment (Firm/Company) 6341 4wy 90 (Address) Milton Florida (City/State and Zip Code) -83 ۷

For further information concerning this matter, please call:

(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$30.00 Filing Fee & Cartificate 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 Tailahassee, FL 32301

06/06/06 TUE 13:44 FAX

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WEST DIG

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

West Dig oment UC (Present Name) (A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on  $\frac{1-23-06}{1-23-06}$  and assigned document number  $\frac{1.06000007449}{1-249}$ 

SECOND: This amendment is submitted to amend the following:

Delete; Rence Chorlowski		
as MANAGERIMEMBER	_	
ADDRESS: 5345 Cherub Cirele		
Milton FL 32583	06 JUN -8	
		FI
ADD: Ryan P Water	PSSEI MARY	
ESSA Cottoned Th		
6599 14 ST	- OHE	
Kalamaroo MI 49009	- 7	
MGR/MEMBER	-	
	-	
Dated <u>6-6-06</u>		
Kundalin		
Signature of a member or authorized representative of a member		
Renee C Kozlowski		
Typed or printed name of signee		

Filing Fee: \$25.00