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COVER LETTER

Division of Corporations	
SUBJECT: CATLIN TWO, 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:	
Thomas M. VALLEY Name of Person	
CATLIN TWE, L-LC Firm/Company [4850] Copied	
Firm/Company Firm/Company POB Brook MRAdew DA 936 John Anders South Address ORMOND BRACH, City/State and Zip Code HYDIM AS IN VALLEY & JANOB. COM! TEARLEY EXCEPTION E-mail address: (10 be used for future annual report footification) For further information concerning this matter, please call: 386 527 6661	
PORT ORANGE FL 32129 Pla 32176 City/State and Zip Code	2
HOMAS IN VALLEY & JANOO, COW TEARLEY ECARLEY ELECTRIC. COM?	,
For further information concerning this matter, please call:	
Thomas M. Valley at (386) 451-0777 Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee. Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) 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

CHTLIN TWO	, LLC	
(Name of the Limited Liability C (A Florida Lin	Company as it now appears on our reco mited Liability Company)	ords.)
The Articles of Organization for this Limited Liability Com Florida document number LOGOOCO 100	npany were filed on <u>01/31</u> 757	106 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company here:	
The new name must be distinguishable and contain the words "Limited Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRES)		LC" or the abbreviation "L.L.C."
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		~ S
) (r))	St. 28
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		rds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	200	
	Enter Florida street add	ress
	City	FloridaZip 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 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.

If Changing Registered Agent. Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = A	Authorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Thomas M. VALLEY	906 Bredlernerdow De	Add
		PORT ORANGE, FL 32179	Remove
			Change
			🗆 Add
			Remove
			Change
			□ Add
			□ Remove
			Change Change Change Change Change
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			Remove
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			🗆 Add
			Remove
			Change

TRUMAN E. GAILEY VA WILL	STAG
AS THE "AMBR", ALSO 5	hall BE
TRUMAN E. GAILEY IN WILL AS THE "AMBR", ALSO S. Copied ON ANY and ALL I	DOCUMENTS/GORESPON
	10 - 2-3-1-3-3-1-3-1-3-1-3-1-3-1-3-1-3-1-3-1-
	<u></u> 01
tive date, if other than the date of filing:	(optional)
ffective date is listed, the date must be specific and cannot be prior to date of filing or n If the date inserted in this block does not meet the applicable statutory filinent's effective date on the Department of State's records.	nore than 90 days after filing.) Pursuant to 605.0207 (3)(tong requirements, this date will not be listed as the
cord enceities a delayed affective data but act as affect	himo at 10.01 and an the section
cord specifies a delayed effective date, but not an effective a 90th day after the record is filed.	time, at 12:01 a.m. on the earlier of:
Dept 12 2016	
Sept 12 2016 3 Superfure of a member or authorized representative Thuman E Garley In Typed or printed name of signee	
Signature of a member or authorized representative	e of a member
\mathcal{U}	

Page 3 of 3

Filing Fee: \$25.00