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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Professional Wrecker Operators of Florida - Training Division LL (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:		
Mike Seamon		
(Name of Person)		
Professional Wrecker Operators of Florida		
(Firm/Company)		
4718 Edgewater Drive		
(Address)		
Orlando, FL 32804-1124		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Mike Seamon at (407) 296-3316		
(Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$25.00 Filing Fee \$\ \times \text{\$30.00 Filing Fee & }\ \text{Certificate of Status} \text{ S55.00 Filing Fee & }\ \text{Certified Copy & Certificate of Status & Certified Copy & Certified Copy} \text{Certified Copy} \text{Certified Copy} \text{Certified Copy} \text{Certified Copy}		

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

STREET/COURIER ADDRESS:

(additional copy is enclosed)

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

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

Professional Wrecker Operators of Florida - Training Division LLC (Present Name) (A Florida Limited Liability Company)

FIRST:	The Articles of Organization were filed on March 21, 200 document number L06000031182	06 and assi	gned		
SECOND:	This amendment is submitted to amend the following: Article IV				
	Replace MGRM Joe Cammarata with				
	Lynda Wood 7018 U.S. Hwy. 19, New Por	rt Richey, F	L 346	52	
			 '		
				Hair 90	
Dated	April 4		:	-7 四	*****
	Signature of a member or authorized representative	of a member		PI 3: 15	•
	Mike Seamon Typed or printed name of signee				
	i yped or printed name of signee				

Filing Fee: \$25.00