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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

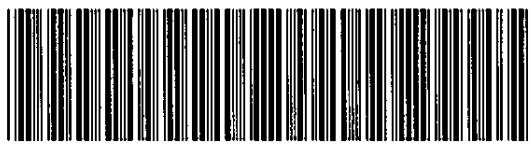
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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15 MAR 19 PM 1:54
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M. MILLIGAN
EXAMINER

APR 22 2015

SEAWAY PLASTICS ENGINEERING, INC.
FLORIDA FINISHING, LLC
6006 Siesta Lane
Port Richey, Florida 34668

3-12, 2015

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

Re: Consent of Name Use

Dear Sir/Madam:

The undersigned, as the Directors of Seaway Plastics Engineering, Inc. (the "Corporation") and also as the Members of Florida Finishing, LLC (the "Company"), hereby consent to both the Corporation and Company changing their name with the Florida Department of State to "TSPB Enterprises Inc." and "TSPB Enterprises LLC", respectively.

If you have any questions, or need any additional information, please do not hesitate to contact me. Thank you.

SEAWAY PLASTICS ENGINEERING, INC.



Timothy N. Smock, Director

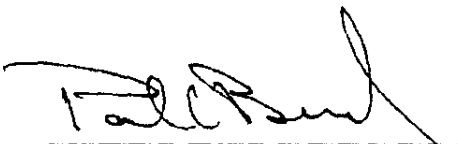


Paul C. Bernard, Director

FLORIDA FINISHING, LLC



Timothy N. Smock, Member



Paul C. Bernard, Member

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Florida Finishing, 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:

Justine Lanciault

Name of Person

Lewis Rice LLC

Firm/Company

600 Washington Ave., Suite 2500

Address

St. Louis, MO 63101

City/State and Zip Code

jlanciault@lewisrice.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Justine Lanciault

at (314) 444-1389

Name of Person

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

LINDQUIST

L I N D Q U I S T + V E N N U M

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Sheila L. Holman
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80 South Eighth Street
4200 IDS Center
Minneapolis, MN 55402-2100
Phone: (612) 371-3211
Fax: (612) 371-3207

March 18, 2015

Via Overnight Delivery

Florida Department of State
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**Re: Seaway Plastics Engineering, Inc.
Seaway Plastics Engineering LLC
Florida Finishing, LLC**

Dear Sir/Madam:

Enclosed for filing with your office in the following order are:

1. Articles of Amendment to Articles of Incorporation of Seaway Plastics Engineering, Inc. Our firm check in the amount of \$35.00 for the filing fee is enclosed.
2. Resolution to Withdraw Alternate Name in the State of Florida Pursuant to 605.0906 (1) Florida Statutes. This document needs to be filed after document number one is completed as that will make the name available in Florida. Once the name has been changed, please issue a Certificate of Status in the name of Seaway Plastics Engineering LLC. Our firm check in the amount of \$30.00 is enclosed to cover the filing fee and the Certificate of Status.
3. Articles of Amendment to Articles of Organization of Florida Finishing, LLC. Our firm check in the amount of \$25.00 for the filing fee is enclosed.

I have included a federal express return envelope for your use to return all filing evidence and the Certificate of Status.

March 18, 2015
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Please do not hesitate to contact me with any questions.

Very truly yours,

Sheila L. Holman

Sheila L. Holman
Paralegal

Enclosures

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
15 MAR 19 PM 1:54
COMPLIANCE DEPARTMENT
TALLAHASSEE, FLORIDA

Florida Finishing, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 03/31/2006 and assigned
Florida document number L06000034100.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

TSPB Enterprises LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, Florida _____

City

Zip 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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 3-12- 2015



Signature of a member or authorized representative of a member

Paul Bernard, Managing Member
Typed or printed name of signer

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15 MAR 19 PM 1:54
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA