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## **COVER LETTER**

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	nternations	al Rigging Group, LLC				
SUBJECT:Name of Limited Liability Company						
The enclosed A	Articles of .	Amendment and fee(s) are sub	omitted for filing.			
Please return a	II correspo	ndence concerning this matter	to the following:			
		Anthony J. Messina				
		<del></del>	Name of Person		_	
		Messina Law Group, P.A.				
			Firm/Company		-	2
		2550 Permit Place				<u>1</u> 24 J
			Address			
		New Port Richey, FL 3354	44		::	<u>5</u>
			City/State and Zip Code		- :::: ::::	9
		E-mail address: (	to be used for future annual report noti-	fication)	رات الدا	03
For further info	ormation co	oncerning this matter, please c	all:			
Anthony J. Me	essina		813 492-7798 at ( )			
	Name of	Person	Area Code Daytime	e Telephone Numbe	r	
Enclosed is a c	heck for th	e following amount:				
<b>≅</b> \$25.00 File	ing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ate of Stat	us &
	ng Address	_	Street Address: Registration Sec	rtion		
Registration Section Division of Corporations		Division of Cor				
	Box 6327		The Centre of T	allahassee		
Talla	hassee, F	L 32314	2415 N. Monroe	Street, Suite 8	310	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

International Rigging Group, LLC			
(Name of the Limi	ited Liability Company as it now app (A Florida Limited Liability Compan	ocars on our records.) y)	<del></del>
The Articles of Organization for this Limited L	and assigned		
lorida document number L06000036496	<u></u> .		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability company	here:	
he new name must be distinguishable and contain the	words "Limited Liability Company," t	he designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:		
Principal office address MUST BE A STRE	ET ADDRESS)		53
			1 3 E 3 E
Inter new mailing address, if applicable:		· · · · · · · · · · · · · · · · · · ·	
Mailing address MAY BE A POST OFFICE	<u></u>	<u> </u>	177.711 *****
			17 <sup>10</sup> 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
			75 6
B. If amending the registered agent and/or agent and/or the new registered office addr	registered office address on ouess here:	ir records, enter the	name of the new register
Name of New Registered Agent:	Demetrios Kosta Vavlas		
New Registered Office Address:	20 Hibisa	S S S Florida street address	2권
	Taken Soline	, Florid	34689,
	Juy	, 2 2 3 3 4	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 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 = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Haralambos P. Vavlas		□ Add
			■Remove
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					1 11	03	
ffective date, if other than the date an effective date is listed, the date must be lote:  If the date inserted in this block ocument's effective date on the Department.	specific and cannot does not meet t	he applicable s			iling.) Pursu		
record specifies a delayed effective d l is filed.	ate, but not an ei	fective time, a	t 12:01 a.m. on t	he earlier of: (b)	The 90th	day after ti	he
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