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SECRETAKY OF STATE

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJE	ECT: ALOTTA PRESSUR. (Name of	E BUSINESS GROUP, LLC f Limited Liability Company)		
The end	closed Articles of Amendment and fee(s) are	submitted for filing.		
Please r	return all correspondence concerning this ma	atter to the following:		
	BARRINGTON C	(Name of Person)		
		(Firm/Company)		
BARRINGTON G. COOMBS & ASSOCIATES, P.A. \$500 N. STATE ROAD 7 SUITE 460				
	ı.	AUDÉREVALE LAKES, FL 33319		
	(C	Stry/State and Zip Code)		
For furt	her information concerning this matter, pleas	se call:		
	BENJAMIN ROBRIGUEZ (Name of Person)	at (954) 967-9767 (Area Code & Daytime Telephone Number)		
Enclosed	l is a check for the following amount:			
\$25.0	0 Filing Fee S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certificate of Status & Certificate Copy (additional copy is enclosed) 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		

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

FILED 06 SEP -8 AM 10: 01 SECRETARY OF STATE TALLAHASSEE, FLORIDA

ALOTTA PRESSURE BUSINESS GROUP, LLC.
(Present Name)
(A Florida Limited Liability Company)

FIRST:	The Articles of Organization were filed on $\frac{6/2\sqrt{0.6}}{40000063236}$.	and assigned	· · · · · · · · · · · · · · · ·
SECOND:	This amendment is submitted to amend the following:		
	ADD THE FOLLOWING MANAGER:		<u> </u>
	IRISH, PHILIP		<u></u>
			_
			_ .
			·
			_
			_
			<u> </u>
Dated	9/1, 2006.		
	Signature of a member or authorized representative of a BACRINGTON COMBS CAA Typed or printed name of signee	member	5 1€
	BARRINGTON COOMBS, CAA		···
	Typed or printed name of signee		

Filing Fee: \$25.00