

L06000077298

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

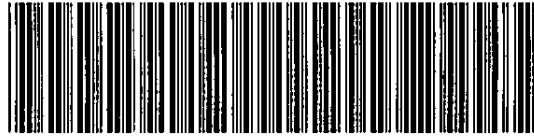
Special Instructions to Filing Officer:

L. SELLERS

NOV - 5, 2009

EXAMINER

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11/04/09--01019--002 **25.00

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CW SPECIALTIES, LLC

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

c/o CHRISTOPHER WILSON, PRESIDENT
CW SPECIALTIES, LLC
3099 LEON RD UNIT 8
JACKSONVILLE, FL 32246 US

For further information concerning this matter, please call:

CHRISTOPHER WILSON at 904-861-8133.

Enclosed is a check for the following amount:

- \$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status (additional copy is enclosed) \$55.00 Filing Fee & Certified Copy \$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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
CW SPECIALTIES, LLC
L06000077298**

FIRST: The Articles of Organization were filed on November 2, 2009 and assigned document number L06000077298.

SECOND: This amendment is submitted to amend the following:

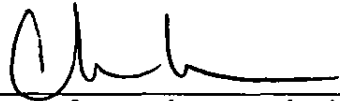
ARTICLE V: The name and address of managing members/managers are:

Title: P/S
CHRISTOPHER WILSON
1936 2ND AVE N
JACKSONVILLE BEACH, FL 32250 US

Title: V
SHAWN RECTOR
3709 SAN PABLO S APT 302
JACKSONVILLE, FL 32224 US

Title: V
KEITH LECHLEIDNER
221 SEMINOLE RD
ATLANTIC BEACH, FL 32233 US

Dated November 2, 2009.



Signature of a member or authorized representative of a member

CHRISTOPHER WILSON, President

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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