L06000079917

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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N. Culligan AUG 22 2006

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Don Heinrich Insurance Agency
(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:

Patricia Reed
(Name of Person)

Don Heinrich Insurance Agency
(Firm/Company)

1507 N. State Rd 7 Ste A
(Address)

Margate, FL 33063
(City/State and Zip Code)

For further information concerning this matter, please call:

Patricia Reed at (954) 747-5400
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- [x] $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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
06 AUG 21 PM 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRW Insurance II, LLC
(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 8/11/06 and assigned document number L06000079917.

SECOND: This amendment is submitted to amend the following:

Don Heinrich Insurance Agency, LLC

Dated 8/16/06, _____.

Patricia Reed
Signature of a member or authorized representative of a member

Patricia Reed
Typed or printed name of signee

Filing Fee: $25.00