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Special Instructions to Filing Officer:		
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S. HAWKES
FEB 0 6 2009
EXAMINER

' COVER LETTER

TO: Registration Sect Division of Corpo				
SUBJECT: ALL MARINE DOCK AND SEAWALL, 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:				
	DONALD	(Name of Person)		
	330 TEI	(Firm/Company) FERSON CT		
330 JEFFERSON CT				
	Ff MYE	RS BRACH FL	33931	
		(City/State and Zip Code)		
For further information concerning this matter, please call:				
STEUE SMITH (Name of Person) at 228 224 3494 (Area Code & Daytime Telephone Number)				
(Name of	Person)	(Area Code & Daytime T	elephone 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	

MAILING ADDRESS:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

(additional copy is enclosed)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALL MARINE D	DOCK AND SHAWALL, LLC	
(Name of the Limited Liability Con (A Florida Limit	mpany as it ńow appears on our records.) ted Liability Company)	
The Articles of Organization for this Limited Liability Comp Florida document number <u>L06000811</u> 6		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Company," the designation, "LLC" the abbreviation	
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u>s</u>	
Enter new mailing address, if applicable:	15: 2	
(Mailing address MAY BE A POST OFFICE BOX)	The same same same same same same same sam	
	d office address on our records, <u>enter the name of the new</u> <u>here</u> :	
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 608, 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 Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member <u>Title</u> <u>Name</u> **Address Type of Action** RONALD A. MENARD ☐ Add Remove Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2009 Dated ____ Signature of a member or authorized representative of a member

Page 2 of 2

STRUEN 6, Typed or printed name of signee

Filing Fee: \$25.00