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SECRETARY OF STATE

COVER LETTER

SUBJECT:
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Person) HAL Restry (Sirm/Company) (Address) (City/Static and Zip Code)
For further information concerning this matter, please call: (Name of Person) at (239) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$25.00 Filing Fee \$30.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) 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

(Fresent Name)
Florida Limited Liability Company) FIRST: The Articles of Organization were filed on document number ______ O O SECOND: This amendment is submitted to amend the following: Dated NOWINGEL