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COVER LETTER

то:	Registration S Division of Co								
SUBJE	ECT:	CLW Indu	strial Gro	up, LLC					
			ited Liability C						
The end	closed Articles of	f Amendment and fee(s) are sul	omitted for filir	ng.					
Please	return all corresp	ondence concerning this matter	to the following	ng:					
			Barry Gre						
			Name of	Person					
		CLW F		Services Gr	oup				
			Firm/Co	mpany					
		4301 And	hor Plaza F	Parkway, Sui	te 400				
			Addre	ess					
			Tampa, F	L 33634					
		 	City/State and						
		bç	reenfield@	clwrg.com			SEC	20 Hi	
For fur	ther information of	concerning this matter, please of		ture annuai report	nomication)		AHASS	2010 SEP 30	ANTIGO TOTAL
	Bai	rry Greenfield	at (_8	13 \	349-8	360	(E) (C)	A:	T
		of Person	u (Area Code & Da	ytime Telepl	one Number	Y OF STATE		g.3814 2 mr. g.
Enclose	ed is a check for t	he following amount:					,		
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certifie	iling Fec & ed Copy onal copy is encl	osed)	\$60.00 Filing Certificate Certified C (additional	of Status of		
	Regist Divisio P.O. B	LING ADDRESS: ration Section on of Corporations dox 6327 assee, FL 32314	Sageth of the	STREET/CO Registration S Division of Co Clifton Buildin 2661 Executiv Tallahassee, F	ection orporations ng e Center Ci				

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

CL (<u>Name of the Limited</u> (A	W Industrial Group, LLC Liability Company as it now appear Florida Limited Liability Company)	rs on our records.)			
The Articles of Organization for this Limited Li Florida document number L07000015	· · ·	02/09/2007	and assigned		
This amendment is submitted to amend the follows: A. If amending name, enter the new name of	_				
The new name must be distinguishable and end wit "L.L.C." Enter new principal offices address, if applications of the principal office address MUST BE A STREE	h the words "Limited Liability Compa able:		'LLC" or the abbreviation		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)		SSEE, FLORIDA		
B. If amending the registered agent and/oregistered agent and/or the new registered of		our records, <u>enter</u>	the name of the new		
Name of New Registered Agent:	Barry Greenfield				
New Registered Office Address:	New Registered Office Address: 4301 Anchor Plaza Parkway, Suite 400 Enter Florida street address				
New Registered Agent's Signature, if changing R	Tampa City	, Florida	33634 Zip Code		
ten registeren rigent a bignature, it changing r	agistered 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

4

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR_	Louis Varsames	4301 Anchor Plaza Parkw Suite 400 Tampa, FL 33634	☐ Remove
			□ D
			□ n
			Add Remove
		· · · · · · · · · · · · · · · · · · ·	Roomeve Pro
D. If amend	ing any other information,	enter change(s) here: (Attach additional sheets	₽
Dated	September 21		
	Signature	of a member of authorized representative of a mem	ber
	-	Barry Greenfield	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00