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COVER LETTER

TO: Registration Se Division of Cor				
SUBJECT: Premiun	n Ice, LLC			
•		ited Liability Company)		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	William A. Stanly, III			
		(Name of Person)		
		(Firm/Company)		
	3675 Pine St.			0
		(Address)		B MA
	Jacksonville, FL 32	205		超平马
		(City/State and Zip Code)		震。
For further information of	concerning this matter, please o	all:		PILED OR MAR -6 AM 11: 12 SECRETARY OF STATE SECRETARY OF STATE
William A. Stanly,	ff)	at (904) 866-2118		日本 2
	of Person)	(Area Code & Daytime	Telephone Number)	
Enclosed is a check for t	he 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 Fe Certificate of S Certified Copy (additional cop	Status &

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

Premium Ice, LLC (Name of the Limited Liabil) (A Florid	lity Company as it now appears on our reda Limited Liability Company)	cords.)	
The Articles of Organization for this Limited Liability	y Company were filed on 9/6/07	and assigned	
Florida document number <u>L0700090964</u>	.		
This amendment is submitted to amend the following	:		
A. If amending name, enter the new name of the li	imited liability company here:		
Speedy Ice, LLC		•	
The new name must be distinguishable and end with the vull.L.C."	words "Limited Liability Company," the des	ignation "LLC" or the abbreviation	
B. If amending the registered agent and/or reg	mistered office address on our record	王四 1 並	
registered agent and/or the new registered office a			
Name of Navy Begintered Agents		AH II: 12 Y OF STATE Y EE, FLOAD	
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter Florida street address) , Florida		
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registe	ered 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

Add Remove Signature of a member or authorized representative of a member William A. Stanly, III	<u>tle</u> <u>N</u>	ame	Address	Type of Action
Add Remove Add Add Remove Add Add Remove Add A		·		
Add Remove Add Add Remove Add Add Remove Add A				Remove
Add Remove Add Remove Remove				
If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) and March 3 Signature of a member or authorized representative of a member	 -		· · · · · · · · · · · · · · · · · · ·	
If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) and March 3 , 2008 Signature of a member or authorized representative of a member				Add
If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) and March 3 , 2008 Signature of a member or authorized representative of a member				Remaye
If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) and March 3 , 2008 Signature of a member or authorized representative of a member				AR I Add - 6
If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) ed March 3 , 2008 . Signature of a member or authorized representative of a member				OF S
ed March 3 , 2008 . Signature of a member or authorized representative of a member				The Total
Signature of a member or authorized representative of a member	If amending a	ny other information, e	enter change(s) here: (Attach additional sheets, if	necessary.)
Signature of a member or authorized representative of a member				
Signature of a member or authorized representative of a member				
Signature of a member or authorized representative of a member				
Signature of a member or authorized representative of a member	ed March 3			······································
			of a member or authorized representative of a member	,

Page 2 of 2

Filing Fee: \$25.00