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SECRETARY OF STATE
TALLAHASSEE FINALE

D. BRUCE
MAR 16 2011
EXAMINER

COVER LETTER

Division of Co	rporations	<i>,</i>	
SUBJECT:	T and D Trucki	ng of Vero Beach LLC	
	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
	ondence concerning this matter		
		Derion Blidgen	
		Name of Person	, , , , , , , , , , , , , , , , , , ,
		de' Rion Group LLC	
	Firm/Company		
	4645 43rd ct		
		Address	
		Vero Beach Fl. 32967	
		City/State and Zip Code	
	E-mail address: (Iblidgen@yahoo.com to be used for future annual report no	milication)
For further information	concerning this matter, please of	call:	
n	erion Blidgen	at (772)	538 - 01 - 07 m = 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	of Person	at (// 2) Area Code & Dayt	MAR IL AHASSEE FLORIDE STATE S
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	LING ADDRESS:		RIER ADDRESS:
Registration Section Division of Corporations		Registration Sec Division of Corp	porations
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Tallahassee, FL	Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

T and D Trucking of Ve	ero Beach LLC			
(Name of the Limited Liability Company as (A Florida Limited Liabili	it now appears on our records. ty Company)			
The Articles of Organization for this Limited Liability Company were Florida document numberL07000101687	e filed on October 2007 and assigned			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability of	company here:			
de' Rion Group	LLC			
The new name must be distinguishable and end with the words "Limited Li"L.L.C."	iability Company," the designation "LLC" or the abbreviation			
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)	≥ →			
	ARETAR:			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)	OF STATE ORD			
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	address on our records, enter the name of the new			
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street address			
	, Florida			
Cit	ty 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

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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>:

	Manager I = Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If as	mending any other information, enter change Business will be a construction comp	e(s) here: (Attach additional sheets, if necessar	77
	principal (Derion Blidgen)	·	MAR I L
			F. F. LORIDA
Dated _	March 12 , 20	<u>111 </u>	
	Signature of a member	or authorized representative of a member	
	·	Derion Blidgen or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00