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## **COVER LETTER**

Division of Corporations
SUBJECT: NEW WAVE STORM SOLUTIONS LLC (Name of Limited Liability Company)
(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:
CAND ATEMIAN (Name of Person)
(Name of Person)
New wave Storm Solutions (Firm/Company)
(Firm/Company)
255 E. DANIA BCh Blud #231 (Address)
,
Dania FL 3 3004 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
DAVID AJEMIAN at (954) 9234750 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee,
Certificate of Status Certified Copy Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

**Registration Section** 

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**

(Present Name)
(A Florida Limited Liability Company)

New WAVE Storm

FIRST:	The Articles of Organization were filed on 11-6-07 and assigned document number 6070001/2202.		
SECOND:	This amendment is submitted to amend the following:		
	ADD MEMBER!		
	CHTISTINE GRIFFEL - MANAGER		
	4993 MEADOW PAIK Dr		
	PIHS BUTCH, PA 15236		•
	· · · · · · · · · · · · · · · · · · ·		
		<del></del>	
		<del></del>	•
Dated	11-16-07		
	Signature of a member of a uthorized representative of a member	 	SECRETI DIVISION O
	Signature of a memoer pr authorized representative of a memoer	19 /	
	Typed or printed name of signee	<del>_</del>	;; <del>-}</del> (=

Filing Fee: \$25.00