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SECRETARY OF STATE TALLAHASSEE, FLORIDA

2009 HAY 1.1 PH 4::

C. LEWIS

MAY 1 2 2009

EXAMINER

COVER LÉTTER

Division of Co				
SUBJECT: Subaqueou	us Services, LLC			
	(Name of Lim	nited Liability Company)		
The enclosed Articles o	f Amendment and fee(s) are sub	bmitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Michelle Perry			
		(Name of Person)		
	Orion Marine Group, Inc.			
		(Firm/Company)	-	
	12550 FUQUA STREET			
		(Address)		
	HOUSTON, TX 77034			
		(City/State and Zip Code)		
For further information	concerning this matter, please of	call:		
MICHELLE PERRY		at (713) 852-6532		
MICHELLE PERRY (Name of Person) at (713) 852-6532 (Area Code & Daytime Telephone Number)			elephone Number)	
Enclosed is a check for	the 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 Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
MATI	INC ADDRESS.	STREET/COURIER	ADDDESS.	

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

FILED

2009 MAY 11 PM 4: 21

SECRETARY OF STATE TALLAHASSEE. FLORIDA

Subaqueous Services, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on February 15, 2008	and assigned
Florida document number L08000016807		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
Orion Dredging Services, LLC		
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Company," the design	ation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	N-81	
		<u> </u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		···
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		enter the name of the new
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:		
Tien Registered Office (Radiess).	(Enter Florida st	reet address)
	(City) , Florida (Zip Code)	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre the provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent as po- being filed to merely reflect a change in the registered office of	ete performance of my duties,	and I am familiar with and

(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 = Ma MGRM = 1	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
***************************************			Add Remove
			D Damasia
<u> </u>			□ Domouo
			Remove
	ding any other information, enter change name change shall be made effective on Jun		FILED SECRETARY OF STATE SECRETARY OF STATE SECRETARY OF STATE
Dated May	J. Cabell Acree, III, Secretary	er organistized representative of a memb	.i. Cabell Acree III
	Туре	d or printed name of signee Page 2 of 2	

Filing Fee: \$25.00