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7. E. A.

(Requestor's Name)				
(Address)				
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. Parks: - 06/27/11--01020--002 : **25.00 :

JUNZ 8 2011

COVER LETTER

TO:	Registration S Division of Co						
SUBJECT: DOMINION INDUSTRIES,LLC							
Name of Limited Liability Company							
The en	closed Articles o	f Amendment and fee(s) are sul	bmitted for filing.				
Please return all correspondence concerning this matter to the following:							
<u></u>			JULIUS A. BAKER				
	Name of Person						
DOM			INION INDUSTRIES,LL	<u>C</u>			
Firm/Company							
18		920 BELMONT DRIVE					
Address			Address				
CUTLER BAY ,FLORIDA							
City/State and Zip Code							
jabbaker@gmail.com E-mail address: (to be used for future annual report notification)							
For fur	ther information	concerning this matter, please of	•	iotification)			
	JUL	IUS A. BAKER	at (305)	244-3376			
	Name	of Person	Area Code & Da	ytime Telephone Number			
Enclos	ed 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 enclo	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
	Regis Divisi P.O. E	LING ADDRESS: tration Section on of Corporations Box 6327 hassee, FL 32314	STREET/COI Registration Se Division of Co Clifton Buildin 2661 Executive Tallahassee, FI	rporations g e Center Circle			

ARTICLES OF AMENDMENT SECRETARY OF STATE TO OIVISION OF CORPORATIONS ARTICLES OF ORGANIZATION

ARTICLES OF ORGANIZATION OF

11 JUN 27 PM 2: 19

DOMINION IND	DUSTRIES,L	LC	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appe: Liability Company)	ars on our records.)	
The Articles of Organization for this Limited Liability Company	y were filed on	FEB.19,2008	and assigned
Florida document numberL0800017568			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lial	bility company he	ere:	
The new name must be distinguishable and end with the words "Lim"L.L.C."	nited Liability Comp	pany," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:	N/A		
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:	N/A		
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		our records, enter th	ne name of the new
Name of New Registered Agent:	·		
New Registered Office Address:		nter Florida street addr	
	E.		E 33
	City	, Florida	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

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 **Title** Type of Action <u>Name</u> **Address** COO JOHN PRICE 6320 SW 58th Place ☐ Add ✓ Remove Miami Florida 33143 CEO MICHAEL KERRY 7581 SIERRA TERR. Remove **BOCA RATON, FL. 33433** COO JULIUS A. BAKER ✓ Add 18920 BELMONT DRIVE ☐ Remove CUTLER BAY, FL. 33157. Add Remove $\prod Add$ Remove \prod Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) JUNE 23,2011 Dated ____ ignature of a member or authorized representative of a member JULIUS A.BAKER

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Filing Fee: \$25.00

Typed or printed name of signee