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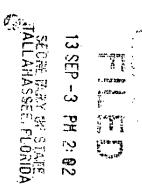
| (Requesto | or's Name) |
|--------------------------------|------------------------|
| (Address) | |
| (Address) | |
| (City/State | e/Zip/Phone #) |
| PICK-UP | WAIT MAIL |
| (Business | s Entity Name) |
| (Documer | nt Number) |
| Certified Copies | Certificates of Status |
| Special Instructions to Filing | Officer: |
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Office Use Only



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09/03/13--01041--022 **35.00



J. Sith see SEP O 6 2013

COVER LETTER

| SUBJECT: MASTER CONCRETE COATINGS, LLC 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: |
| MICWAEL WOOD Name of Person |
| MASTER CONCRETE COATINGS, LLC Firm/Company |
| 1808 Go. Club CT |
| TAMPA, FL 336/2 City/State and Zip Code |
| MIKE CONSTER CONCRETE COATINGS. Com E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| MICHAEL WOOD at 8/3 977-6/38 Name of Person Area Code & Daytime Telephone Number |
| Enclosed is a check for the following amount: \$\text{25.00 Filing Fee} \text{\$\text{\$\sum_{\text{30.00 Filing Fee} & }} \text{\$\text{\$\sum_{\text{55.00 Filing Fee} & }} \text{\$\text{\$\text{\$\sum_{\text{50.00 Filing Fee} & }} \text{\$\text{\$\text{\$\sum_{\text{55.00 Filing Fee} & }} \text{\$\text{\$\text{\$\sum_{\text{50.00 Filing Fee} & }} \text{\$\text{\$\text{\$\sum_{\text{50.00 Filing Fee} & }} \$\text{\$\$\text{ |
| Certificate of Status Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed) |
| MAILING ADDRESS: STREET/COURIER ADDRESS: Paritation Sertion |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations

TO:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| MASTER CONCRETE C | COATINGS | LLC | | |
|---|---------------------------------------|------------------------------|-----------------------|--|
| (Name of the Limited Liability Company as it (A Florida Limited Liability | Company) | coras.) | | |
| The Articles of Organization for this Limited Liability Company were fi | iled on <u>6 - 12</u> | - 08 and assi | igned | |
| Florida document number <u>L080005808</u> / | | | | |
| This amendment is submitted to amend the following: | | | | |
| A. If amending name, enter the new name of the limited liability co | mpany here: | | | |
| The new name must be distinguishable and end with the words "Limited Liab" L.L.C." | oility Company," the des | ignation "LLC" or the a | bbreviation | |
| Enter new principal offices address, if applicable: | | , | | |
| (Principal office address MUST BE A STREET ADDRESS) | | <u>*∜</u> | | |
| | | 5# A | 4 % | |
| | | HAN P | न् दे कालक स्टब्स् | |
| Enter new mailing address, if applicable: | · · · · · · · · · · · · · · · · · · · | <u> </u> | f | |
| Mailing address MAY BE A POST OFFICE BOX) | | लां _{ड -} <u>च्</u> | | |
| | | e=0 ~ ~ | ACTION . | |
| B. If amending the registered agent and/or registered office ad registered agent and/or the new registered office address here: | dress on our record | s, enter the name of | f the new | |
| egistered agent and/or the new registered office address nere. | 1 | | | |
| Name of New Registered Agent: | · · · · · · · · · · · · · · · · · · · | | | |
| New Registered Office Address: | | | ···· | |
| | Enter Florida street address | | | |
| | , Florida | | | |
| City | | 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

| Title | Name | Address | Type of Action |
|-----------------|--|--|----------------|
| MERM | LEWIS T. BLASTIC | 1898 3. Club CT TAMPA FL 33612 | Add Remove |
| <u>MGRM</u> | JEANNE K. WOOD | 1808 9. Club CT TAMPA FL 33612 | Add Remove |
| | | | Add Remove |
| | · . · | | Add Remove |
| | | | Add Remove |
| | · | | Add Remove |
| D. If amendi | ng any other information, enter change(s | s) here: (Attach additional sheets, if necessary:) | SEP- |
| - | | ; ; | 3 H 2: 0 |
| Dated <u>Au</u> | Markar Still | and- | — N |

Page 2 of 2

Filing Fee: \$25.00