Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : ARES & COMPANY, C.P.A., P.A.

Account Number : 120000000268 : (305)229-8256 Phone : (305)229-8252 Fax Number

**Enter the email address for this business entity to be used for future

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CRANETEC L.L.C.

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NOV 13 2009

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	CRANE	TEC L.L.C.				
(Name of the Limite	d Liability Com A Florida Limite	pany as it now appear d Liability Company)	s on our records.)			
The Articles of Organization for this Limited	Liability Compa	my were filed on	03/12/2009	and a	assign e d	
Florida document number L0900002	24347					
This amendment is submitted to amend the fo	llowing:					
A. If amending name, enter the new name	of the limited li	ability company here	2:			
	_ N	I/A				
The new name must be distinguishable and end w "L.L.C."	rith the words "Li	imited Liability Compar	y," the designation "	LLC" or the	e abbrev	iation
Enter new principal offices address, if appli	icable:	N/A				_
(Principal office address MUST BE A STRE	ET ADDRESS)	<u> </u>	- <u>-</u>			
				N.	Page 1	
					3 5	
Enter new mailing address, if applicable:		N/A			NOV	1 1
(Mailing address MAY BE A POST OFFICE	E BOX)			895		

				22,,	- II. -	
B. If amending the registered agent and	Vor registered	office address on o	ur records, enter	the nome	of the	new
registered agent and/or the new registered	office address h	<u>ere</u> :		THE THATTE	<u>S</u>	
Name of New Registered Agent:	N/A					
New Registered Office Address:						
		Enter Florida street address				
			, Florida			
		City		Zin Co	de	_

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, 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	Name	Address	Type of Action
MGR	HELIA MEDINA	11950 SW 10TH ST. MIAMI FL 33184	7 Add Remove
MGM	Roberta Bastian-Gocke	1000 QUAYSIDE TERRACE APT. 1802 MIAMI. EL. 33138	Add Remove
<u></u>			
			Add
 			□Add ○ □Remove □N
			E Add ERemove
D. If an	nending any other information, ente	er change(s) here: (Attach additional sheets, if nec	essary.)
	NOVEMBER 44, 2000	^	
Dated _	NOVEMBER 11, 2009	member of authorized representative of a member	
	=	member of authorized representative of a member HELIA MEDINA - MANAGER	
		Typed or printed name of signee	

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Filing Fee: \$25.00