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D. BRUCE

SEP 15 2009

EXAMINER

COVER LETTER

Division of Corp	orations				
SUBJECT:	Mimis	Metal's, LLC			
		ited Liability Company			
The enclosed Articles of A	Amendment and fee(s) are su	bmitted for filing.			
Please return all correspon	dence concerning this matte	r to the following:			
	With the Name of the Control of the	Richard A. Akins			
		Name of Person			
		Firm/Company		promi	
	307 Buttonwood LN Address			09 SEP I PH 12: I SECRETARY OF STATALLAHASSEE, FLOR	-n
				P 14 PASSE	
		Largo, FL 33770 City/State and Zip Code		PH Z	
	E-mail address: (ins@mimismetals.com to be used for future annual report notificat	ion)	ORIDA ORIDA	
For further information con	ncerning this matter, please of	call:		2	
Richard Akins Name of Person		at (727) 94 Area Code & Daytime To	6-5915 elephone Number		
Enclosed is a check for the	_				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Certificate Certified C (additional	of Status &)
MAILING ADDRESS: Registration Section Division of Corporations		STREET/COURIER Registration Section Division of Corporation			

P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mimis Me		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed onJune 3rd, 200	9 and assigned
Florida document number L0900053637		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company," the designation	n "LLC" or the abbreviation
Enter new principal offices address, if applicable:	307 Buttonwood LN	
(Principal office address MUST BE A STREET ADDRESS)	Largo, FL 33770	Ö9 SEI
Enter new mailing address, if applicable:	P.O. Box 37	IL P
(Mailing address MAY BE A POST OFFICE BOX)	Palm Harbor, FL 34682	F SAI
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office Address:	<u>'e</u> :	
	Enter Florida street (address
	, 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** <u>Name</u> **Address Type of Action MGRM** Gary J Smith 3645 Kings Rd #102 ☐ Add Palm Harbor, FL 34685 Remove ☐ Add Remove \prod Add ☐ Remove Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) September 04_A 2009 Dated Signature of a member or authorized representative of a member Richard A Akins Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00