## L09000055889

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SECRETARY OF STATE
AND ASSECT FOR ORDER

J. BRYAN

APR 1 3 2009

**EXAMINER** 

## **COVER LETTER**

TO: Registration S Division of Co			
SUBJECT:	Craftech	Industries, LLC	
	Name of Limi	ted Liability Company	
	f Amendment and fee(s) are sub ondence concerning this matter	-	10 APR 12 M 7: 39 SECRETARY OF STATE FALL AHASSEF, FLORIO
	Alfred B. Osterhout		STET OF
		Name of Person	5. r
	Cr	raftech Industries, LLC	
		rimi/Company	
264		42 Floral Ave Suite #6	
		Address	
		Apopka, FL 32703 City/State and Zip Code	
	alo	Dlevel5management.net	
	E-mail address: (	to be used for future annual report notifica	tion)
For further information	concerning this matter, please o	all:	
Alfre	ed B. Osterhout	at ( 321 ) 40	03-3994
Name	of Person	Area Code & Daytime T	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)
Regis Divisi P.O. F	LING ADDRESS: tration Section on of Corporations Box 6327 hassee, FL 32314	STREET/COURIEI Registration Section Division of Corporati Clifton Building 2661 Executive Cent Tallahassee, FL-3230	ions er Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

O APR 12 M 7: 39
SECRETARY OF STATE

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) June 9th 2009 The Articles of Organization for this Limited Liability Company were filed on and assigned L09000055889 Florida document number \_ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	Dustin G. Stauffer	2642 Floral Ave Suite #6 Apopka, FL 32703	Add Remove
			Add Remove
			Add Remove
			Add Remove
			AddRemove
			Add Remove
D. If amend	ling any other information, enter	change(s) here: (Attach additional sheets, if necessa	ary.)
			TO APR
	April 2	2010	ARY OF STATE
	V 9	nember or authorized representative of a member  Alfred B. Osterhout	39 NTE
	ì	Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00