L09000066600

Office Use Only



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SECRETARY OF STATE

J. SAULE EXAMINE MAR 2 1 EXAMINER MAR 21 2011

COVER LETTER

TO: A Registration S Division of Co					
SUBJECT:					
	Name of Lin	ited Liability Company			
The enclosed Articles of	f Amendment and fee(s) are su	bmitted for filing.			
Please return all corresp	ondence concerning this matte	er to the following:			
	Bart	ora Tinkle, Legal Assistan	t		
		Name of Person			
		ITERA USA, Inc.			
	Firm/Company				
	0				
	E-mail address:	barbrat@itera.com (to be used for future annual report no	otification)		
For further information of	concerning this matter, please	•	,	20	
В	arbra Tinkle	at (904)	996-8800	LANGE AND	
Name o	of Person	Area Code & Dayt	996-8800 ime Telephone Number	2011 MAR 18 PH SECRETARY OF S	
Enclosed is a check for t	he following amount:			E * 1	
 ✓ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	ed) Certified C	of Status &	

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Green C	Chem Holdings, LLC	;		
(<u>Na</u>	ne of the Limited Liabilit (A Florida	ty Company as it now appear Limited Liability Company)	rs on our records.)	,	
The Articles of Organization f	or this Limited Liability	Company were filed on	July 9, 2009	and ass	igned
Florida document number	L09000066600	·			
This amendment is submitted t	to amend the following:				
A. If amending name, <u>enter</u>	the new name of the lin	nited liability company her	<u>e</u> :		
The new name must be distinguing 'L.L.C."	shable and end with the wo	ords "Limited Liability Compa	my," the designation "L	LC" or the a	bbreviation
Enter new principal offices a	ddress, if applicable:				
(Principal office address MUS	ST BE A STREET ADD	RESS)			
					
Enter new mailing address, i	f applicable:		Ā	20	<u> </u>
Mailing address MAY BE A	POST OFFICE BOX)			9 =	
			Ä Y	AR 8	* . B
B. If amending the registe			SEE	8	
B. If amending the registe registered agent and/or the n	red agent and/or regis ew registered office add	stered office address on o Iress here:		(C)	f the new
			ORI	F: -	The same of
Name of New Registe	ered Agent:		<u>.</u> حر	8	
New Registered Office	e Address:				
		Eni	Enter Florida street address		
			, Florida		
		City		Zin 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 = Mana MGRM = Ma	ager maging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	William E. Chattin	9995 Gate Parkway N. Suite 400 Jacksonville, FL 32246	Add _ ✓ Remove
MGRM	Bellinda S. Chattin	560 Clifton Road Crescent City, FL 32212	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendin	ig any other information, enter change(s) here: (Attach additional sheets, if necessary.)	· ·
Dated	March 16 , 201	<u>1</u> .	
_		r authorized representative of a member	
		Kavalieros, MGRM printed name of signee	
	i yped or	printed name of Signee	

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Filing Fee: \$25.00