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EXAMINER



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COVER LETTER

Division of Co			
SURJECT: PREC	CISION METROLOGY	& ENGINEERING SERVI	ES LIC.
	Name of Lim	ited Liability Company	-/
The enclosed Articles o	f Amendment and fee(s) are sul	bmitted for filing.	
Please return all corresp	ondence concerning this matter	r to the following:	
	BRIAN	REDGRAUE	
		REXEMAUE Name of Person	
	Custom	MARKING Services,	LLC
	310 GE	OPLE ST. KU, Address	
		Rivies FL 3 City/State and Zip Code	4688
	E-mail address: (City/State and Zip Code 1 C TAMPABAY , F.L. Co to be used for future annual report notifica	ition)
For further information	concerning this matter, please of	call:	
BRIAN	REDGRAUE	at (<u>&13</u>) 335 – 9 Area Code & Daytime 1	486
Name	of Person	Area Code & Daytime	lelephone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

PRECISION METROLOGY & ENGINEERING SERVICES LCC,

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(A Florida Limite	ed Liability Company)	
The Articles of Organization for this Limited Liability Compa Florida document number <u>LOQUOOO71827</u> .	any were filed on	7 2009 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	iability company here:	
CUSTOM MARKING SERVICE The new name must be distinguishable and end with the words "L	ES, LLC:	
The new name must be distinguishable and end with the words "L" L.L.C."	imited Liability Company," the d	esignation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	1015 US H	ighway 79 =
(Principal office address MUST BE A STREET ADDRESS)	1015 US H HORDAY, FC	对四
		SSEE 2
Enter new mailing address, if applicable:		7, 5
(Mailing address MAY BE A POST OFFICE BOX)		ORDA 12
B. If amending the registered agent and/or registered registered agent and/or the new registered office address be		rds, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:	Entau Flouis	la street address
	Enter Floria	ia sireei aaaress
	City,	Florida Zip Code
	City	Lip 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 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 **Type of Action Title** <u>Address</u> Name _ Add Remove ☐ Add Remove ☐ Add Remove Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated FEBRUARY 28, 2011. Signature of a member or authorized representative of a member BRIAN E. REDGRAUE

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00