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IO FEB 22 2: 40 SECRETARY OF STATE ALL AHASSEE, FLORIDA

S. HAWKES
FEB 2 3 2010
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: 1813	WELding And FA	brication CLC ted Liability Company	<u>.</u>	
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspon	dence concerning this matter	to the following:	٠.	
	TED Will			
		Name of Person		
		Firm/Company	<u> </u>	
	1100 0	• •		
	493 SEACTEST	Address		
	Marritt Is, Fo			
	TAIT FABRICATION E-mail address: (t	to be used for future annual report notificat	ion)	
For further information concerning this matter, please call:				
TED Will Name of	Person	at (<u>371)</u> ZBB G491 Area Code & Daytime T	elephone Number	
Enclosed is a check for the	e 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)	

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

The Articles of Organization for this Limited Liability Company were filed on \\OV. Florida document number <u>L09000 110 157</u> 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 City

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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member Title **Address Type of Action** <u>Name</u> MGR TED Will JE. Remove TED WILL TIL MG17 Add Remove Remove □Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2010 Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00