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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FASTKIT CORP

Account Number : 120100000009 Phone : (305)599-0839

Fax Number : (305)592-9591

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Certificate of Status	0
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J. BRYAN

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

USA Combustion Services, LLC



(Name of the Limited Liability Compa (A Florida Limited I	ny as it now apper Liability Company)	ers on our records.)	ARIDA	
The Articles of Organization for this Limited Liability Company Florida document numberL10000022276	were filed on	02/26/2010	and assigned	
Clorida document Attables				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company he	re:		
The new name must be distinguishable and end with the words "Limi"L.L.C."	ted Liability Comp	any," the designation "L	C" or the abbreviation	
Enter new principal offices address, if applicable:	8325 NW 11	15 Ct		
(Principal office address MUST BE A STREET ADDRESS)	Doral FI 331	78		
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)			_	
B. If amending the registered agent and/or registered offeetistered agent and/or the new registered office address here		our records, <u>enter th</u>	e name of the new	
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street address			
		, Florida		
	City		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

Title	<u>Nam e</u>	Address	Type of Action
.4			Add Remove
			Add Remove
MGR -	Premier Funeral Supply, Inc.	8325 NW 115 Ct Doral Fl 33178	Add ☑ Remove
	1		Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	SS
			MAR 18 AM 8: 41 CRETARY OF STATE LAHASSEE. FLORID
Dated	March 17, 2010		T
	Signature of a niember of	or authorized representative of a member	
		ex Consulting International, Inc	

Page 2 of 2

Filing Fee: \$25.00