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TALLAHASSEE, FLORIDA

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## **COVER LETTER**

	egistration Section ivision of Corporations				
SUBJECT	. ON SITE	E ENGRAVING LLC			
SCEGECT	· · ·	ited Liability Company			
The anclose	ed Articles of Amendment and fee(s) are sul	hmitted for filing			
		·			
Please retur	rn all correspondence concerning this matter	r to the following:			
	7	INGRAM K McDONALD			
		Name of Person	-		
Firm/Company  Po Box 952  Address					
		Firm/Company -: 13			
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		0 60x 732			
	~	Address &	۱ ۳۳۴		
	DE	FUNIAR SPRINGS FL 32435 3	اران ا		
	1.	City/State and Zip Code			
	Ky Email address:	FUNIAR SPRINGS FL 32435  City/State and Zip Code  Lemac 280 @gmail.com  to be used for future annual report notification)			
	information concerning this matter, please of				
工	NGRAM K McDONAL	at ( 830 ) 978 - 7652  Area Code & Daytime Telephone Number			
	Name of Person	Area Code & Daytime Telephone Number			
Enclosed is	a check for the following amount:				
\$25.00	Filing Fee \$\int\\$30.00 Filing Fee &	\$55.00 Filing Fee & \$60.00 Filing Fee,			
_	Certificate of Status	Certified Copy Certificate of Status & Certified Copy			
		(additional copy is enclosed) Certified Copy  (additional copy is enclose	d)		
• •	MAILING ADDRESS: Registration Section	STREET/COURIER ADDRESS:			
	Division of Corporations	Registration Section Division of Corporations			

P.O. Box 6327

Tallahassee, FL 32314

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ONSITE ENGRAVING LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on \_ and assigned Florida document number <u>L 00000 2459</u>6 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: WARD-MCDONALD MEMORIAL LLC

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:

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

Enter Florida street address

\_, Florida \_\_

Zip Code

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

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