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SECREJARY OF STATE DIVISION OF CORPORATION

T. HAMPTON APR 1 5 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Weld Tec, LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Robert A. Demers
Weld Tec, LLC Firm/Company
15 Sombrero Blvd, unit 105
Marathon, Florida 33050 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Pob Demers at (305 481 - 055) Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{\$\text{\$\subset}\$} \text{\$\text{\$\subset\$}\$} \

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

Weld	Tec, LLC		
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now apperida Limited Liability Company	ars on our records.)	
The Articles of Organization for this Limited Liabil Florida document number		4.01.2010	and assigned
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	limited liability company h	ere:	
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Com	pany," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable	:		
(Principal office address MUST BE A STREET A	DDRESS)		<u></u> ∑s
			APR 14
Enter new mailing address, if applicable:			- • इंट
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>		H 12: 01
B. If amending the registered agent and/or r registered agent and/or the new registered office		our records, enter th	e name of the new
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:		Enter Florida street addre	?SS
	_		
_	City	, Florida	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 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 Title <u>Name</u> **Type of Action** Address Robert A. Demers 15 Sombrero Blvd Add Remove marathon, Florida Add Remove ☐ Add Remove Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00

H. Demers
Typed or printed name of signee