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	Registration Se Division of Cor			
SUBJEC	Unaflex PT	TE Expansion Joint CO, LLC		
00000			ited Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please ret	urn all correspo	ndence concerning this matter	to the following:	
		Howard D White		
			Name of Person	
		Unaflex PTFE Expansion .	Joint CO, LLC	
			Firm/Company	
		1350 S Dixie Hwy E		
			Address	· · · · · · · · · · · · · · · · · · ·
		Pompano Beach, FL, 3306	0	
			City/State and Zip Code	
		Howardman@msn.com		
		E-mail address: (to be used for future annual report notif	ication)
For furthe	r information co	oncerning this matter, please ca	all:	
Howard I) White		954 8573020 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed	is a check for th	ne following amount:		
□ \$25.0	0 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

Unaflex PTFE Expansion Joint CO, 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 $\frac{06/18/2010}{1}$ and assigned Florida document number __L10000065337 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Marine & Industrial PTFE Expansion Joint CO, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 1350 S Dixie HWY E Enter new principal offices address, if applicable: Pompano Beach, FL 33060 (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 20 B. If amending the registered agent and/or registered office address on our records, enter: the mame 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 , Florida

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 605, 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

Zip Code

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M $AMBR = A$	anager uthorized Member		
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Typed or printed name of signee

Filing Fee: \$25.00