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COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: GULF COAST FILTRATION 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: Company Compan					
4750 PEBBLE CREEK Dr. Address PENSACOLA, FLORIDA 32526 City/State and Zip Code Kevin russ & Cox. Net E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
KEV'N Russ at 850 572-5135 Name of Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount:					
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$\ \text{S60.00 Filing Fee, } \ \text{Certified Copy (additional copy is enclosed)}\$\$ Certified Copy (additional copy is enclosed)	d)				

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

CLEAN PIPE		<u> </u>	
. (<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears on ou rida Limited Liability Company)	ur records.)	
The Articles of Organization for this Limited Liabil Florida document number £00000115	ity Company were filed on Juy 4	6th 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 here:		
GULF COAST FILTR	ATION L.L.C.	3	
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company," the	e designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable)* **		
(Principal office address MUST BE A STREET A	DDRESS)	Sylve N	
	······································		
Enter new mailing address, if applicable:		Christ N	
(Mailing address MAY BE A POST OFFICE BO)	<u> </u>		
B. If amending the registered agent and/or registered agent and/or the new registered office		cords, enter the name of the ne	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
_	, Florida		
	City	Zip Code	
Now Designated Assetts Circustums if shareing Designation	ntamad Amants		

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 an 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 Managor Managing Member being added or removed from our records:

MGRM = 1	anager Managing Member		
<u>Title</u>	Name	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
·			Add Remove
			AddRemove
D. If amen	nding any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	2010 DEC -2
			-2 PM 2:28
Dated	1-30 ,201	<u> </u>	23
	KEVIN J. KU	or authorized representative of a member S or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00