~ L10000108545

(Requestor's Name)				
(Address)				
(100.000)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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A. LUNT

JAN 2 6 2011

EXAMINER

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COVER LETTER

Division of Co					
SUBJECT:	Rutlan	d Admin, LLC			
SOBSECT:	Name of Limited Liability Company				
The enclosed Articles of	f Amendment and fee(s) are sul	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
		Lee Browne			
	Name of Person				
	Rutland Admin, LLC				
Firm/Company					
	10895 Rocket Blvd				
	Address				
	Orlando, FL. 32824				
		City/State and Zip Code			
	rut E-mail address: (andoffice@yahoo.com to be used for future annual report notification	on)		
For further information	concerning this matter, please	all:			
	ckey Johnson	at (<u>407</u>) 859 Area Code & Daytime Te	9-1119		
Name	of Person	Area Code & Daytime Tel	lephone Number		
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 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 Registration Section Division of Corporatio Clifton Building 2661 Executive Center	ns		
		Tallahassee, FL 32301			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ru	tland Admin, LLC		
(<u>Name of the Limited Liabi</u> (A Florid	lity Company as it now app la Limited Liability Company	ears on our records.) y)	
The Articles of Organization for this Limited Liability	=	October 18, 2010 and assigned	
Florida document numberL10000108545	·		
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the li</u>	mited liability company l	<u>iere</u> :	
	rming Machinery, LLC		
The new name must be distinguishable and end with the v "L.L.C."	vords "Limited Liability Con		ation
Enter new principal offices address, if applicable:		<u> </u>	
(<u>Principal office address MUST BE A STREET ADI</u>	DRESS)		M
		8	
Enter new mailing address, if applicable:		39.	_
(Mailing address MAY BE A POST OFFICE BOX)			_
			
B. If amending the registered agent and/or reg registered agent and/or the new registered office ac	istered office address or ldress here:	n our records, enter the name of the	new
Name of New Registered Agent:			_
New Registered Office Address:			_
	i i	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 = M MGRM = 1	anager Managing Member	•	
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Domestic.
·			<u> </u>
	***************************************		Add Remove
D. If amen	ding any other information,	enter change(s) here: (Attach additional sheets, if nec	A A A A A A A A A A A A A A A A A A A
 Dated	January 24		
	Signatur	e of a member or authorized representative of a member Lee Browne	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00