

L10000130692

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

☐ MAIL

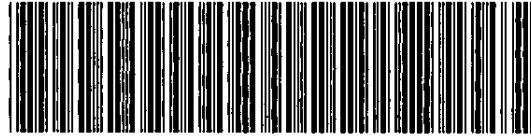
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** AFFORDABLE WELDING AND FABRICATION, 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:

Jennifer Watford

Name of Person

Affordable Welding and Fabrication, LLC

Firm/Company

7800 Coral St., Bay 204

Address

Hypoluxo, FL 33462

City/State and Zip Code

*affordableweldfab@yahoo.com*

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jennifer Watford

561 876-9953  
at ( )

Name of Person

Area Code

Daytime Telephone 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)

☐ \$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**

AFFORDABLE WELDING AND FABRICATION 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 12/23/2010 and assigned  
Florida document number L10000130692.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Cutting Edge Metalworks, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

7800 Coral St., Bay 204

**(Principal office address MUST BE A STREET ADDRESS)**

Hypoluxo, FL 33462

Enter new mailing address, if applicable:

7800 Coral St., Bay 204

**(Mailing address MAY BE A POST OFFICE BOX)**

Hypoluxo, FL 33462

**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:

NA

New Registered Office Address:

7800 Coral St., Bay 204

*Enter Florida street address*

Hypoluxo, FL

Florida 33462

*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 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**

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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 = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
P	Jennifer W. Watford	7800 Coral St., Bay 204	<input type="checkbox"/> Add
		Hypoluxo, FL 33462	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
VP	James M. Watford	7800 Coral St., Bay 204	<input type="checkbox"/> Add
		Hypoluxo, FL 33462	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
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[illegible]

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**Dated** February 18, 2016

Typed or printed name of signee

**Filing Fee: \$25.00**

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