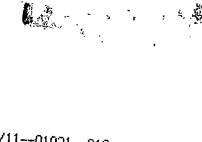
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D. BRUCE

AUG 0 5 2011

EXAMINER

COVER LETTER

Division of C	orporations				
SUBJECT:	Alternative Repair		es, LLC		
	Name of Lim	ited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.			
Please return all corres	pondence concerning this matte	r to the following:			
		Susan H. Turvey			
		Name of Person			
	Alternative F				
		Firm/Company			
	65	6555 Trade Center Drive			
		Address			
		Jacksonville, FI 32254			
		City/State and Zip Code			
	Sturv E-mail address: (ey@armservicesusa.c to be used for future annual repo	om ort notification)		
For further information	concerning this matter, please			#1. 74.E0	
Sı	ısan H. Turvey	at (904)	861-3040	AHA HS	
Name	of Person		Daytime Telephone Number	NRY C	
Enclosed is a check for	the following amount:			PH 3: 1	Ö
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	closed) Certified	e of Status &	d)
			,		

MAILING ADDRESS:

TO:

Registration Section

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

	, Florida
Ent	er Florida street address
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office address on o	our records, enter the name of the nev
	ASSE
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	ALCE T
mited Liability Compa	ny," the designation "LLC" or the abbreviation
ability company her	ត្ន:
ny were filed on	ebruary 2, 2011 and assigned
Liability Company)	g on our records,
Machining Servi	ces, LLC
	office address on e

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 = Manager MGRM = Managing Member Type of Action <u>Address</u> <u>Title</u> <u>Name</u> Thomas J. Tossavainen MGRM 6555 Trade Center Drive ☑ Add Remove Jacksonville, Fl 32254 Gabriel Cuevas, Jr. MGRM ✓ ∧dd 6555 Trade Center Drive Jacksonville, Fl 32254 Remove Add ☐ Remove Remove Remove ___ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated ___ July 28th 2011 Signature of a member or authorized representative of a member Aimee D. Pafford Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00