L110000 25038

(Requestor's Name) (Address) (Address)					
					(City/State/Zip/Phone #)
					PICK-UP WAIT MAIL
(Business Entity Name)					
(Document Number)					
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COVER LETTER

TO:

TO:	Registration Sec Division of Corp			
CYTD I	Tor	Easy Flex Co	uplings, LLC.	
ZUBJ	ECT:	Name of Lim	ited Liability Company	···
		mendment and fee(s) are sub dence concerning this matter	-	
	- 101.00		o me tomo mmg.	
Name of Person				5

			Firm/Company	# The state of the
		4327 9	3. Hwy 27 #327 Address	
		Clare		
			City/State and Zip Code	
		· -	easyflexcouplings.com	
- 0			o be used for future annual report notifi	cation)
		ncerning this matter, please ca		
Fred	erik Louwersheimer	D	407 579-0985 at ()	Talantana Manahara
	Name of	retson	Area Code Daytime	Telephone Number
Enclos	sed is a check for the	following amount:		
■ \$2	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)
	MAILIN	NG ADDRESS:	STREET/COURIE	CR ADDRESS:
	Division	tion Section of Corporations	Registration Section Division of Corpora	i.
	P.O. Box	c 6327	Clifton Building	

Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Easy Flex Couplings, LLC			
(Name of the Limited Lial (A Flor	oility Company as it now appears ida Limited Liability Company)	on our records.)	<u> </u>
The Articles of Organization for this Limited Liability Florida document number L11000025038	Company were filed on	02/28/2011	and assigned
This amendment is submitted to amend the following:	:		
A. If amending name, <u>enter the new name of the li</u>	mited liability company her	<u>re</u> :	
			11.02
The new name must be distinguishable and contain the words "L	imited Liability Company," the de	signation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET AD	DRESS)		0
			11 10 15
Enter new mailing address, if applicable:			ro ,
Mailing address MAY BE A POST OFFICE BOX)			
			
			· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or re-		our records, enter	the name of the nev
registered agent and/or the new registered office a	ddress here:		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flori	da 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 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

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>	Address	Type of Action
Member	Richard R. Hayslett	3701 Bounty Ct	Add
		Matthews, NC 28104 * changing Richard Hay: Monasing member to mem	Remove
			Add
			□ Remove
	······································		□ Add.
			Change
			Remove
			□ Change
	 		□ Add
		-,	☐ Remove
		 	□ Change
			Add
			☐ Remove

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	3
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of fine Note: If the date inserted in this block does not meet the applicable statute document's effective date on the Department of State's records.	(optional) ling or more than 90 days after filing.) Pursuant to 605.0207 (3)(to ory filing requirements, this date will not be listed as the
If the record specifies a delayed effective date, but not an effe (b) The 90th day after the record is filed.	ective time, at 12:01 a.m. on the earlier of:
Dated, 2016	
Signature of a member or authorized repre	sentative of a member
Frederik Louwersheimer	
Typed or printed name of	signee

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Filing Fee: \$25.00