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| Special Instructions to | Filing Officer: | | |
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COVER LETTER

| Division of Corp | | | | |
|-----------------------------|--|------------|---|---|
| SUBJECT: Exteri | a Enterprises, LLC | | | |
| • | Name of Limited Liability Company | | | |
| The enclosed Articles of A | mendment and fee(s) are submitted for filing. | | | |
| Please return all correspon | dence concerning this matter to the following: | | | |
| | Rex A. Wilson | | | |
| | Name of Person | | | |
| | Exterra Enterprises, LLC | | | |
| | Firm/Company | | | |
| | 405 Watercrest St | 286 286 | 2013 F EB | |
| | Address | | | 1 |
| | Sebastian, FL 32958 | ARY | 9- | - |
| | City/State and Zip Code | ار ت | 7 | |
| | info@rrgunshop.net | | ======================================= | 1 |
| | E-mail address: (to be used for future annual report notification) | | | |
| For further information co | ncerning this matter, please call: | بخو. ا | _ | |
| Rex Wilson | 772 ₆₄₆₋₀₅₇₉ | | | |
| Name of | | , | | |

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

Exterra Enterprises, 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 | and assigned | | |
|--|--|--|--|
| Florida document number L11000082064 | | 2013 FEI | |
| This amendment is submitted to amend the following: | | B-6 | |
| A. If amending name, enter the new name of the limited liab | oility company here: | OF STA | |
| The new name must be distinguishable and end with the words "Lim "L.L.C." | ited Liability Company," the d | esignation "LLC" Tof-the appreviation | |
| Enter new principal offices address, if applicable: | 1124 US Highway 1 | | |
| (Principal office address MUST BE A STREET ADDRESS) | Sebastian, FL 32958 | 3 | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 1124 US Highway 1 Sebastian, FL 32950 | - 405 Watercrest St 8 Schastian, FL 32958 | |
| B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her | | rds, enter the name of the new | |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | la 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|-------------------|---------------------|----------------|
| MGRM | Roberta S. Wilson | 405 Watercrest St | Add |
| | | Sebastian, FL 32958 | Remove |
| MGRM | William C. Wilson | PO Box 781106 | Add |
| | | Sebastian, FL 32978 | ZO Remove |
| | | | AND -6 IT |
| | | | Remove |
| | | | |
| | | | Add |
| | | | |
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| | | | Remove |
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Roberta S. Wilson: 40% Owner

Rex A. Wilson: 30% Owner

William C. Wilson: 30% Owner

Dated February 3

Signature of a member or authorized representative of a member

Rex A. Wilson

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00