U1000116631

(Requestor's Name)					
(industrial a marrie)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
(2.5)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



000213361690

10/19/11--01012--004 **25.00

T. CLINE UC1 20 2011 EXAMINER

COVER LETTER

то:	Registration Se Division of Cor					
SUBJE	SUBJECT: REED MODIFIED, INC.					
		Name of Lim	ited Liability Company			
The end	closed Articles of	Amendment and fee(s) are sul	bmitted for filing.			
Please	return all correspo	ndence concerning this matter	r to the following:			
STEVE BARNIER						
			Name of Person			
			Firm/Company			
PO BOX 351459 Address			PO BOX 351459			
		PA				
		REED E-mail address: (
For fur	ther information co	oncerning this matter, please of	•	it nomication,	2011 OCT 19 SECRETARY TALLAHASSE	***************************************
		VE BARNIER	at (386)	445-4997	ASA I	Village of a
	Name of	f Person	Area Code &	Daytime Telephone Number	9 MAID	
Enclose	ed is a check for th	ne following amount:			IQ: 5 STATE	[]
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is en	closed) Certified	te of Status &	

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

; REED	MODIFIED, INC.	on our records)		
(<u>Name of the Limited Liabilit</u> (A Florida	Limited Liability Company)	our dur records.		
The Articles of Organization for this Limited Liability (Company were filed on	10-12-11	and assigned	
Florida document number L11000116631	<u></u> .			
This amound an antice national to a surround the Callandian				
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the lim</u>	ited liability company here	2		
REED	MODIFIED, LLC			
The new name must be distinguishable and end with the wo "L.L.C."	rds "Limited Liability Compan	y," the designation "l	LLC" or the abbreviation	1
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADD)	RESS)		<u> </u>	
			<u> 50 a</u>	****
			7	in itiya
Enter new mailing address, if applicable:			9	
(Mailing address MAY BE A POST OFFICE BOX)				П
				t o mate
			10 ₄ 26	
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		ır records, <u>enter (</u>	the name of the new	<u> </u>
registered agent and/or the new registered office add	ness nere.		, , , ,	
Name of New Registered Agent:				
New Periods of Control of Control				
New Registered Office Address:	Ente	er Florida street ada	lress	
		, 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 = Manager

MGRM = Managing Member <u>Title</u> <u>Address</u> **Type of Action** <u>Name</u> _□ Add Remove ☐ Add Remove ☐ Add Remove ∏ Add Remove □Add D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member MITCHELL A REED Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00