L12000036906

·
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SECRETARY OF STATE

NOV 2 7 2012

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

URIFOT. PA Equipment, 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:

Elizabeth A. Barry

Name of Person

Launch Velocity, LLC

Firm/Company

10406 Edgefield Place

Address

Tampa, FL 33626

City/State and Zip Code

elizabeth.barry@paequipment.us

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

For further information concerning this matter, please call:

Elizabeth A Barry

_{4/}813₁293-3334

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)

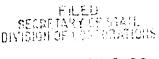
□\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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



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PA Equipment, LLC				
(<u>Name of the Limited</u> (A	Liability Compan Florida Limited Lia	y <mark>as it now appears on c</mark> ability Company)	our records.)	
The Articles of Organization for this Limited Li Florida document number <u>L12000036906</u>	ability Company v	were filed on March	5, 2012	and assigned
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liabil	ity company here:		
The new name must be distinguishable and end wit "L.L.C."	the words "Limite	ed Liability Company," t	he designation "	LLC" or the abbreviation
Enter new principal offices address, if applica	ıble:			
(Principal office address MUST BE A STREE	T ADDRESS)			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE A	<u>BOX)</u>			
B. If amending the registered agent and/or the new registered of	•		ecords, enter	the name of the new
Name of New Registered Agent:	Elizabeth A	A Barry		
New Registered Office Address:	10406 Edg	efield Place		<u> </u>
	-	Enter Fi	orida street ad	
	Tampa	City	, Florida <u>3</u>	Zip Code
		•		r .

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>Name</u> <u>Address</u> **Type of Action CFO** 10406 Edgefield Place Elizabeth Barry Ceder Tampa, FL 33626

CFO	Elizabeth A Barry	10406 Edgefield Place	Add
		Tampa, FL 33626	Remove
			Add
			Remove
			-
			Add
			_ Remove
			-
			Add Remove
			Z6
			PH P: 33
			Remove
			_

). If a	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ated _	November 8 2012
	Eliabeth a Ram
	Signature of a member or authorized representative of a member
	Elizabeth A Barry
	Typed or printed name of signee

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Filing Fee: \$25.00