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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: CORALUNK ENGINEERING 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:		
JOSEPH M. KUSNIR JR. Name of Person		
GLOBALLINK EN GINGERING, UC Firm/Company		
171 MULLICAN PC. Address		
JUPITER, FL 33458 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:	13 MOV -1	
JOSEPH M. KUSNIR, JR. at (51) 317-6547 Name of Person Area Code & Daytime Telephone Number!	₹ . ~ ·	**
Enclosed is a check for the following amount:		
■ \$25.00 Filing Fee \$\ \text{Certificate of Status} \ \text{Certified Copy} \ \text{Certified Copy is enclosed} \ \text{Certified} \ Certif	fig Fee. e of Status &	

MAILING ADDRESS:

TO:

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

TO ARTICLES OF ORGANIZATION OF

GLOBALLINK E	NOWEERIN	16, LIC	
(<u>Name of the Limited Lia</u> (A Flo	rida Limited Liability	Company)	oras.)
The Articles of Organization for this Limited Liabi	lity Company were f	iled on $\frac{5}{7}$	and assigned
Florida document number <u>L12000060</u>	<u> 194</u> .	,	
This amendment is submitted to amend the following	ng:		
A. If amending name, <u>enter the new name of the</u>			
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Lia	bility Company," the desi	gnation "LLC" or the abbreviat
Enter new principal offices address, if applicable	e:		£
(Principal office address MUST BE A STREET A	(DDRESS)		# CS
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Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	X)		3
	<u> </u>		20 cm
B. If amending the registered agent and/or registered agent and/or the new registered office		ddress on our records	s, enter the name of the n
Name of New Registered Agent:	NA		
New Registered Office Address:		Enter Florida :	street address
_		, Fl	orida
	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.

or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member **Type of Action** <u>Address</u> **Title Name** LOURDES G. KUSNIR 171 MULLIGAN PLACE MGRM JUPMER FL 33458 Remove Remove

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D. II ai	f ending any other information, enter change(s) here: (Attach adaitional sheets, if necessary.)
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Dated _	10/30/2012
	Signature of a member or authorized representative of a member
	Typed of printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

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