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(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers MAY 21 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Addition of officer - correction

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:

Sherett L Salter

Name of Person

Panel Armor Products LLC

Firm/Company

1970 Corporate Sq ste b

Address

Longwood, FL 32750

City/State and Zip Code

sheretts@impactsalvagesolutions.com

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

For further information concerning this matter, please call:

Charles R Salter

Name of Person

at (407) 342-3296

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

Panel Armor Products LLC

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MGR = Manager
AMBR = Authorized Member

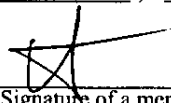
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated April 24, 2014



Signature of a member or authorized representative of a member

Vice President - Charles R Salter

Typed or printed name of signee

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Filing Fee: \$25.00

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