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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: Commercial Diving Maintenance, 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 J. Trodglen Name of Person Commercial Diving Maintenance, LLC Firm/Company 17437 Laura Lee Dr Address Spring Hill, FL 34610 City/State and Zip Code j.trodglen@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Joseph Trodglen Name of Person Daytime Telephone Number Enclosed is a check for the following amount: **■ \$**55.00 Filing Fee & ☐ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & **\$** \$60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) **Mailing Address:** Street Address: **Registration Section** Registration Section **Division of Corporations Division of Corporations** The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Commercial Diving Maintenance, 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 were filed on 7/21/2014 and assigned Florida document number L14000114220 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Joseph J. Trodglen Name of New Registered Agent: 17437 Laura Lee Dr New Registered Office Address: Enter Florida street address ______, Florida 34610-7732 Zip Code Spring Hill

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 comfly 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 605, F.S. Of if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the kinited liability company has been notified in writing of this change.

Joseph Trodglan

If Changing Registered Agent Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Joseph J. Trodglen	17437 Laura Lee Dr	
		Spring Hill, FL 34610	□Remove
			≡ Change
AMDR	Jason V. Trodglen	106 Tall Pines Ct	□Add
		Toney, Alabama 35773	□ Remove
AMBR	Matthew E. Garske	703 W. Alamo Dr	□Add
		Lakeland, Ft. 33813	□Remove
		 	■Change
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