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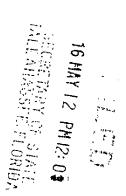
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Special Instructions	to Filing Officer:
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MAY 13 2016 J SHIVERS

COVER LETTER

TO: Registration Section Division of Corporation		·	, · · ·
SUBJECT: FO	rce Fastener	5 LLC	
	Name of Lim	ited Liability Company	
The enclosed Articles of Am	endment and fee(s) are sub-	mitted for filing.	
Please return all corresponde	nce concerning this matter	to the following:	
	Michael	Switzek Name of Person	
		Name of Person	
		steners LLC Firm/Company	
		Firm/Company	
	8517 A	/W 68 th St Address	
		Address	
	Miami	FL 33/66 City/State and Zip Code arce fasteners. com	
		City/State and Zip Code	
_	Mike@ Fa	orce fasterers.com	
		to be used for future annual report notifi	cation)
For further information conce	erning this matter, please ca	all:	
Michael	Switzer	at (305) 582 - 6	5058
Name of Per	rson	Area Code Daytime	Telephone Number
Enclosed is a check for the fo	ollowing 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**

ers LLC	
mpany as it now appears on our records.) ted Liability Company)	
any were filed on	and assigned
iability company here:	
iability Company," the designation "LLC" or the ab	obreviation "L.L.C."
2	
Force Fasteners LLC 7138 SW 13th St. Mirami, FL 33144	
office address on our records, <u>enter</u> nere:	the name of the no
	20 P
Enter Florida street address	T S T
, Florida	
	iability Company here: iability Company here: iability Company," the designation "LLC" or the ability Company," the designation "LLC" or the ability Company,

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 605, 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 Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records:</u>

MGR = Manager

AMBR = Authorized Member Title <u>Name</u> **Address** Type of Action MGR Julio Perez 8517 NW 68th Street _□ Add Remove ☐ Change □ Add ☐ Remove _□ Change _□ Add _□ Remove ☐ Change □ Add □ Remove ☐ Change _□ Add _□ Remove _

Change ☐ Add _□ Remove ☐ Change

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Page 3 of 3

Filing Fee: \$25.00