

L16000043372

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

**D. BRUCE
DEC 12 2016**

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Anzu Industrial Products 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:

Debrah Herman
Name of Person

Anzu Partners LLC
Firm/Company

1399 New York Ave, NW, STE 601
Address

Washington DC 20005
City/State and Zip Code

debrah@anzupartners.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Debrah Herman at (813) 917-7733
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

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Anzu Industrial Products 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 3/1/16 and assigned Florida document number L16000043372.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Edge Rubber LLC

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)

811 Progress Road

Chambersburg, PA 17201

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1399 New York Avenue, NW

Suite 601

Washington, DC 20005

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:

Name of New Registered Agent:

Debrah Herman

New Registered Office Address:

15905 Prince William

Enter Florida street address

Odessa

Florida

City

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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 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.

Debrah Herman

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Whitney Haring-Smith	1399 New York Ave, NW	<input checked="" type="checkbox"/> Add
		Suite 601	<input type="checkbox"/> Remove
		Washington, DC 20005	<input type="checkbox"/> Change
AR	Debrah Herman	15905 Prince Williams PL	<input checked="" type="checkbox"/> Add
		Odessa, FL 33556	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

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TALLAHASSEE, FLORIDA

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

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated December 1, 2016

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

David Seldin

Typed or printed name of signee