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## **COVER LETTER**

TO: Registration Section Division of Corporations  SUBJECT: STABLITE E  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:			
The enclosed Articles of Ar	nendment and fee(s) are subr	mitted for filing.	
Please return all correspond	ence concerning this matter	to the following:	
	BIECT: STOULTE E LC  Name of Limited Liability Company  enclosed Articles of Amendment and fee(s) are submitted for filing.  see return all correspondence concerning this matter to the following:    Company		
		Name of Person	
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For further information con	cerning this matter, please ca	all:	
020000 B	-D C-1=11 -	ar (235) 697	-2534
	егѕоп	Area Code Daytime	Telephone Number
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

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**

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Enter Flor	ida street address			
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	company he Company," the d	ere filed on	e address on our records, enter the  Enter Florida street address , Florida	ere filed on

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, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager
AMBR =	<b>Authorized Member</b>

<u>Title</u>	<u>Name</u>	Address	Type of Action
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		Naples FL 34116	🗆 Remove
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ective date, if other than n effective date is listed, the date. If the date inserted in the cument's effective date on the	e must be specific and cannot is block does not meet the	ot be prior to date of fil ne applicable statuto	ing or more than 90 days aff	tional) ter filing.) Pursuant to 605 his date will not be list	5.02( <b>e</b> d a
record specifies a del he 90th day after the	ayed effective date, record is filed.	but not an effec	tive time, at 12:01	a.m. on the earli	erc
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——— <del>—</del>	Signature of a membe	er or aythorized repres	entative of a member		

Page 3 of 3

Filing Fee: \$25.00