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## **COVER LETTER**

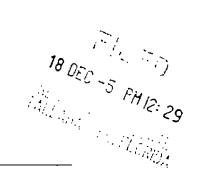
TO: Registration 8 Division of Co			
TDENV	RONMENTAL CONSULTING,	LLC	
SURJECT:			
	Name of Limit	ed Liability Company	
The enclosed Articles of	of Amendment and fee(s) are subn	nitted for filing.	
Please return all corres	condence concerning this matter to	o the following:	
	Thomas D.Waite		
		Name of Person	
		Firm/Company	
	2240 Front Street, STE 103	• •	
		Address	<u> </u>
	Melbourne, Florida 32901		
	<del></del>	City/State and Zip Code	
	teedeewaite@gmail.com		
	E-mail address: (to	be used for future annual report notil	ication)
For further information	concerning this matter, please cal	D:	
Thomas D. Waite		828 372-2039	
Name	of Person	at ()	c 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 Cliflon Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



TID ENVIRONMENTAL CONSULTING, 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 Li Florida document number 1.18000076668	ability Company	were filed on March	and assigned
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	the limited lial	bility company here:	
FERRATE SOLUTIONS, LLC			
The new name must be distinguishable and contain the w	ords "Limited Liab	ility Company," the desig	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	NA	
(Principal office address MUST BE A STREE	T ADDRESS)		
Enter new mailing address, if applicable:		NA	
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		
B. If amending the registered agent and/ registered agent and/or the new registered of			ar records, enter the name of the new
Name of New Registered Agent:	NA		
New Registered Office Address:	NA	Enter Florida	street address
		City	Florida

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.

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> Address Type of Action NA \_□ Add \_□ Remove \_□ Change \_D Add \_D.Change □ Add □ Remove \_□ Change □ Add \_□ Remove \_\_\_\_\_ Change \_□ Add \_□ Remove \_□ Change  $\square$  Add □ Remove

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fective date, if other than the date of filing:  meffective 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 605.020 total. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a cument's effective date on the Department of State's records.  The specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the 90th day after the record is filed.  December 2, 2018  Internal State of the state		
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ted		
	ı	December 2, 2018
Signature of a member or authorized representative of a member	ted _	<del></del>
Signature of a member or authorized representative of a member		Thomas D. Waite
		Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00