N2300013438

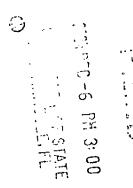
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COVER LETTER

TO: Amendment Section Division of Corporations

PUNISHERS LEMC IRON HORS NAME OF CORPORATION:	E LLC		<u></u>
N23000013438 DOCUMENT NUMBER:			-
The enclosed Articles of Amendment and fee are submitted for filing			
Please return all correspondence concerning this matter to the follow	ring:		
MIKE RAMSEY			
(Name of Con	tact Person)		
PUNISHERS LEMC IRON HORSE LLC			
(Firm/ Co	mpany)		
11816 SE 99TH TERRACE			
(Addre	ess)		
BELLEVIEW, FL 34420			
(City/ State and	d Zip Code)	•	
PLEMCIRONHORSE@GMAIL.COM			
E-mail address: (to be used for future annu	ual report notification	on)	<u> </u>
For further information concerning this matter, please call:			
STEPHEN H ELDRIDGE II	352 at	697-0326	
(Name of Contact Person)		(Daytime Telep	hone Number)
Enclosed is a check for the following amount made payable to the Flo	orida Department of	State:	Ø
■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Certificate of Status Certified Co		0 Filing Fee ficate of Status	: <u>1</u>

(Additional copy is

enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Certified Copy

(Additional Copy is Enclosed)

Articles of Amendment to Articles of Incorporation of

of PUNISHERS LEMC IRON HORSE LLC (Name of Corporation as currently filed with the Florida Dept. of State) N23000013438 (Document Number of Corporation (if known) Pursuant to the provisions of section 617,1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: STEPHEN H ELDRIDGE II Name of New Registered Agent: 9600 S EVANS AVE (Florida street address) New Registered Office Address: **INVERNESS** (City)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

ATE O If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change. Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: XChange X Remove X Add	<u>V</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>S</u>	CURTIS MONNIG	12321 SE 87TH TERRACE BELLEVIEW, FL 34420
Remove			
2) Change Add	VP	MIKE RAMSEY	11816 SE 99TH TERRACE BELLEVIEW, FL 34420
X Remove 3) Change Add X Remove	SEC.	DEVIN ALLEN	8940 SE 159TH LANE SUMMERFIELD, FL 34491
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet	ng addition ets, if necess	sal Articles, enter change(s) here: sary). (Be specific)	STATE 13:00
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The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

(Title of person signing)