(Req	uestor's Name)	
(Add	ress)	
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(City	/State/Zip/Phone	e #)
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(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
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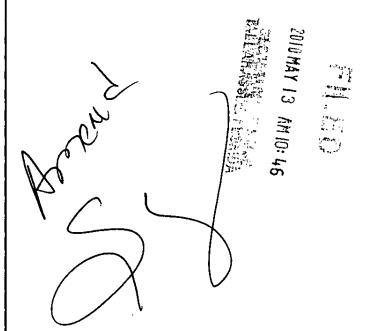
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# Law Offices of Bonnie A. Brown

73 SW Flagler Avenue Stuart, Florida 34994

Real Estate, Title Services, Probate, Short Sales and Foreclosures

Telephone: (772) 221-9024 (772) 221-9086 Fax:

May 12, 2010

Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

RE: Client: Rediron Fabrication, Inc.

Document Number: P93000082236

To Whom It May Concern:

Enclosed you will find Articles of Amendment to Articles of Incorporation for the above referenced entity. We have also enclosed our trust account check in the amount of \$52.50, for payment of the filing fee and a certificate of status and certified copy. Please return the documents to our office in the enclosed self-addressed, stamped envelope.

If you have any questions, please feel free to contact me.

Respectfully,

Bonnie A. Brown, Esquire

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORE	PORATION:	Rediron Fabrication, Inc	<u>.                                    </u>	
DOCUMENT NU	MBER:	P93000082236		
The enclosed A <b>rtic</b>	les of Amendment and fee a	re submitted for filing.		
Please return all co	rrespondence concerning thi	s matter to the following:		
	<del></del>	Bonnie A. Brown		
	N	ame of Contact Person		
	Law Offices of Bonnie A. Brown, LLC			
		Firm/ Company		
	73 SW Flagler Avenue			
		Address		
		Stuart, FL 34994		
	. c	ity/ State and Zip Code		
<del></del>	mcintosh E-mail address: (to be use	nalec@yahoo.com d for future annual report notification)	<del></del>	
For further informa	ation concerning this matter,	please call:		
В	onnie A. Brown	at (	1-9024	
Name	of Contact Person	Area Code & Daytime Tele	phone Number	
Enclosed is a check	c for the following amount n	nade payable to the Florida Departi	ment of State:	
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)		
Mailing Ac Amendmen Division of P.O. Box 6 Tallahassee	t Section Corporations 327	Street Address  Amendment Section  Division of Corporations  Clifton Building  2661 Executive Center Circle	<u>:</u>	

Tallahassee, FL 32301

# **Articles of Amendment** · to .

, , · · ·	Articles of Incorporation of	OMAY, SO
<u></u>	Rediron Fabrication, Inc.	AM IN
(Nai	me of Corporation as currently filed with the Florida Dept. of State)	10.46
<u> </u>		
	(Document Number of Corporation (if known)	

•		
(Document)	Number of Corporation (if known)	
Pursuant to the provisions of section 607. amendment(s) to its Articles of Incorporation		Profit Corporation adopts the follow
A. If amending name, enter the new nam	e of the corporation:	
		The new
name must be distinguishable and conta abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered," '	the designation "Corp," "Inc," or "	Co". A professional corporation
B. Enter new principal office address, if (Principal office address MUST BE A STR		
	<del></del>	
	**************************************	· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		
(Maung dauress MAI BE A FOST OF		
D. If amending the registered agent and/ new registered agent and/or the new r	or registered office address in Florice	la, enter the name of the
Name of New Registered Agent:	Alec J. McIntosh	
	1601 SE Village Green Driv	e e
New Registered Office Address:	(Florida street address)	
	Port St. Lucie	, Florida 34952
	(City)	(Zip Code)
New Registered Agent's Signature, if cha I hereby accept the appointment as registered	nging Registered Agent:	and the ablications of the maritims
inereoy accept the appointment as register.	ed agent. Ram familiar with and access	ept the obligations of the position.
	Signature of New Registered Agent	if changing

ALEC J. MCINTOSH

### 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)

Title	<u>Name</u>	Address	Type of Action
Pres	Anthony R. Tarter	2292 SE Rock Springs Drive Port St. Lucie, FL 34952	. □ Add □ Remove
PDST	Alec J. McIntosh	1601 SE Village Green Drive Port St. Lucie, FL 34952	☑ Add ☐ Remove
			Add Remove
(and a	dditional sheets, if necessary). (Be	specific)	
<u>provisi</u>		e, reclassification, or cancellation of issent if not contained in the amendment	