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**EXAMINER** 



400214366354

11/18/11--01010--007 \*\*60.00



## **COVER LETTER**

TO: Registration Section Division of Corporations

SUBJECT:	A & B HUDSO	N PROPERTIES LLC				
	Name of Limi	ted Liability Company				
	$\cdot$					
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspondent	ondence concerning this matter	to the following:				
Name of Person						
A & B HUDSON PROPERTIES LLC						
Firm/Company						
1312 Montrose Way						
		Address				
Melbourne, Florida 32940-2187						
City/State and Zip Code						
	ahudson001@cfl.m.com  E-mail address: (to be used for future annual report notification)					
			incation)			
For further information of	concerning this matter, please c	all:				
Arth	ur L Hudson Jr	at ( 321 )	259 5258			
Name of Person		Area Code & Daytin	ne Telephone Number			
Enclosed is a check for the	he following amount:					
\$25,00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclose	\$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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

A & B HUDSOI	N PROPERTIES	S LLC		
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appe aited Liability Company	ars on our records.)		
The Articles of Organization for this Limited Liability Com	npany were filed on	August 5, 2011	and as	ssigned
Florida document numberL11000090896				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	l liability company he	ere:		
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Comp	pany," the designation "Ll	LC" or the	abbreviatio
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRES	<u> </u>	<del>&gt;</del>	<i>(:</i>	
				* 1 *** 1 *
		HA	NAT ANN	i j
Enter new mailing address, if applicable:		SS	<u>~</u>	e e e e e e e e e e e e e e e e e e e
	_	- tu	<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	<u></u>	F 61A	
•			A W	
		>	•	
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		our records, enter th	e name	of the nev
· · · · · · · · · · · · · · · · · · ·	s nere:			
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	·	· · ·	
New Registered Office Address:				
	E	nter Florida street addr	ess	
•		, Florida		
	City		Zip Coa	le

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

	ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGMR	Barbara C Hudson	1312 Montrose Way Melbourne_Florida 32940-2187	Add Remove
MGR_	Barbara C Hudson	1312 Montrose Way Melbourne, Florida 32940-2187	✓ Add ☐ Remove
			Add Remove
***************************************			Add Remove
	<u>.                                    </u>		Add Remove
			Add Remove
D. If amend	ling any other information,	enter change(s) here: (Attach additional sheets, if necessary.)	_
			<del>-</del>
			<del>-</del> -
Dated	October 29	L. Mudson J.	
	Signatur	e of a member or authorized representative of a member	
		Arthur L Hudson Jr Typed or printed name of signee	
		i voca of drinea hame of signee	

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Filing Fee: \$25.00