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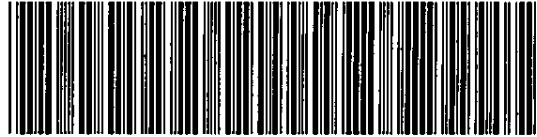
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TALLAHASSEE, FLORIDA

Thomas FEB - 5 2008

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HOGREVE & HOGREVE, LC
(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:

Lisa Loevenguth Hogreve
(Name of Person)

Lisa Loevenguth Hogreve, LLC
(Firm/Company)

96 Willard Street, Suite 206
(Address)

Cocoa, Florida 32922-7946
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Lisa Loevenguth Hogreve at (321) 633-3242
(Name of Person) (Area Code & Daytime 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 2, 2008

LISA LOEVENGUTH HOGREVE
96 WILLARD STREET, STE 206
COCOA, FL 32922-7946

SUBJECT: HOGREVE & HOGREVE, LC
Ref. Number: L01000001556

We have received your document for HOGREVE & HOGREVE, LC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas
Regulatory Specialist II

Letter Number: 308A00000059

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TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

HOGREVE & HOGREVE, LC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on January 30, 2001 and assigned document number L01000001556.

SECOND: This amendment is submitted to amend the following: Name, registered agent and dropped member

Name: Lisa Loevenguth Hogreve, LLC

Registered Agent: Lisa Loevenguth Hogreve

Member dropped: Barton W. Hogreve

Dated December 27, 2007.



Signature of a member or authorized representative of a member

Lisa L. Hogreve

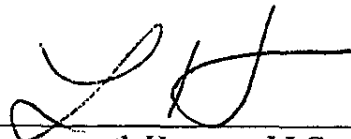
Typed or printed name of signee

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TALLAHASSEE, FLORIDA

Filing Fee: \$25.00

ACCEPTANCE OF REGISTERED AGENT

I hereby state that I am familiar with and I accept the duties and responsibilities as registered agent for the limited liability company, Lisa Loevenguth Hogreve, LLC.



Lisa Loevenguth Hogreve, LLC
96 Willard Street, Suite 206
Cocoa, Florida 32922-7946
Tel.: 321 / 633-3208
Fax: 321 / 633-4240

Dated: January 31, 2008

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