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SECRETARY OF STATE
TALLAHASSEE, FL

O SIMMONS APR 0 6 2022

COVER LETTER

TO: Registration So Division of Cor			
SUBJECT. Hammon	d Asset Management Li	LC	
SCHOLET.		nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.	
Please return all correspo	ndence concerning this matter	r to the following:	
	Heather Hammond		
	-	Name of Person	
	Hammond Asset Mar	nagement	
		Firm/Company	
	4855 Hoyer Drive		
		Address	
	Sarasota, Florida 34	4241-9222	
		City/State and Zip Code	
	heatheradash@yahoo		Harte A
For further information or	e-mail address: (oncerning this matter, please c	to be used for future annual report not	meanony
101 Iditates information ex	meening this matter, prease e	a 11.	
Heather Hammond		at (941) 356-108	
Name of	`Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for th	e following amount:		
S25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Address</u> Registration S	ection	Street Address: Registration Se	
Division of Co P.O. Box 6327	•	Division of Cor The Centre of	-
Tallahassee, F			e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT | ED TO ARTICLES OF ORGANIZATION 24 AN 8-02

9.
Hammond Asset Managray Appasses, EL
(Maine of the Limited Larding Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Lia Florida document number L02000017972	bility Company v	were filed on 10/03/20	018 reinstatement and assigned
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited liabil	lity company here:	
The new name must be distinguishable and contain the wo	rds "Limited Liabilit	ty Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREET	ADDRESS)		
	·		
Enter new mailing address, if applicable:		4855 Hoyer Drive	
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u>	Sarasota, Florida 3	4241-9222
B. If amending the registered agent and/or regagent and/or the new registered office address		ldress on our records	, enter the name of the new registered
Name of New Registered Agent:	Heather Hamr	mond	
New Registered Office Address:			
		Enter Florida stree	ı address
			, Florida
		City	Zip Code

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.

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
MGR_	Heather Hammond	4855 Hoyer Drive, Sarasota, FL 34241-922	! <u>2</u> ⊠Add
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ote: If the	late, if other than the date is listed, the date in e date in this seffective date on the	block does not	meet the applic	cable statutory	or more than 90 da	(optional) ys after filing.) P nts, this date wi	ursuant to 605.0207 Il not be listed as
record sp	ecifies a delayed effect	tive date, but not	t an effective t	ime, at 12:01 a	.m. on the earlie	r of: (b) The S	Oth day after the
is fileu.							
	oruary 28	A 2	2022 Jan	- voijl	Hive of a member		

Filing Fee: \$25.00