

L030000036640

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

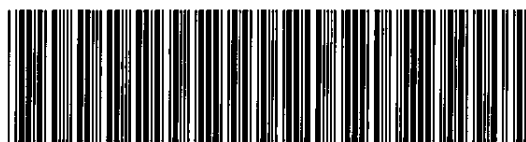
(Business Entity Name)

(Document Number)

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08 JUL -9 PM12:46
SECRETARY OF STATE
DIVISION OF CORPORATIONS

B. Tedlock JUL 14 2008

FF #25



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
JUN 30 2008

June 26, 2008

SUZANNE M. YODER, LEGAL ASST.
NORTON, HAMMERSLEY, LOPEZ ET AL
1819 MAIN ST., SARASOTA CITY CTR., S-610
SARASOTA, FL 34236

SUBJECT: HAMMER, LLC
Ref. Number: L03000036640

We have received your document for HAMMER, LLC and your check(s) totaling \$416.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

✓ The name of the above referenced limited liability company is no longer available. Please file an amendment changing the name of this entity. The fee to file an amendment is \$25.00.

✓ In order to complete your filings, both the reinstatement application and name change amendment must be submitted together along with the applicable fees for processing.

✓ The registered agent must sign accepting the designation.

✓ You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed on the report form.

Please return your document, along with a copy of this letter, within 30 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6911.

Brenda Tadlock

Registration/Qualification Section
Division of Corporations Letter Number: 008A00038538

COPY

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: HAMMER, LLC
(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:

JOHN W. CHAPMAN, ESQ.
(Name of Person)

NORTON, HAMMERSLEY, LOPEZ & SKOKOS, P.A.
(Firm/Company)

1819 Main Street, Suite 610
(Address)

Sarasota, FL 34236
(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN W. CHAPMAN at (941) 954-4691
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

08 JUL - 9 PM 12:46
SECRETARY OF STATE
DIVISION OF CORPORATIONS

HAMMER, LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on September 25, 2003 and assigned Florida document number L03000036640.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

HAMMER II, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

2906 Hyde Park Street

(Principal office address MUST BE A STREET ADDRESS)

Sarasota, FL 34239

Enter new mailing address, if applicable:

2906 Hyde Park Street

(Mailing address MAY BE A POST OFFICE BOX)

Sarasota, FL 34239

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

John W. Chapman, Esq.

New Registered Office Address:

1819 Main Street, Suite 610

(Enter Florida street address)

Sarasota

(City)

, Florida 34236

(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 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

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

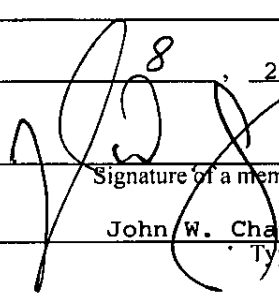
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated July 8, 2008



Signature of a member or authorized representative of a member

John W. Chapman, Esq.

Typed or printed name of signee