1300057300

(Re	equestor's Name)	
(Ac	ddress)	
	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Вс	usiness Entity Nam	ne)
(Do	ocument Number)	
ertified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



500302010035

5명명령무르대라만명⁵**25.00



D SCOTT AUG 4 2017

COVER LETTER

Division of Cor	porations		
SUBJECT:	Hendrix S	Omith & Kirby Ll	LC
The enclosed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Mic	hael Bay Name of Person	
	Hendrix S	Pirmy Company	
	152 SE De	Mender Dr Address	
	LakeCiTy	FL 32025 City/State and Zip Code	
	<u>a L FMa 1</u> E-mail address: (i	//01@ yahoo, Co) to be used for fugure annual report notif	ication)
For further information co	oncerning this matter, please ca	all:	1
Micha Name of	e Bay f Person	at (386) 623 - Area Code Daytime	-3606 Telephone Number
Enclosed is a check for th	ne 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:

TO:

Registration Section

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**

Hendrix Smith す K (Name of the Limited Liability Compa	irby LLC	
(A Florida Limited	<u>ny as nyiow appears on our re</u> Liability Company)	ecoras.)
ne Articles of Organization for this Limited Liability Company orida document number $\underline{L0300057300}$.	were filed on $\frac{2\sqrt{3}}{}$	and assigned
nis amendment is submitted to amend the following:		
If amending name, enter the new name of the limited liab	ility company here:	
ne new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
		·····•
nter new mailing address, if applicable:		
lailing address MAY BE A POST OFFICE BOX)		· •
		<u> </u>
		, *
If amending the registered agent and/or registered o gistered agent and/or the new registered office address her		ords, enter the name of the
Name of New Registered Agent:		
Name of New Registered Agent: New Registered Office Address:		
	Enter Florida street a	ddress
		ddress - Florida

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.

If 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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Sorensen + Smith LLC	147 SW Summers Lane	🗆 Add
		Lake City, FL 32025	Remove
			Change
MGR	Gerald M. Smith Jr	462 SW Ben Oaks CT	DAdd
		Lake City, FL 32024	🗆 Remove
			☐ Change
			Remove
			☐ Change
			□ Add
			□ Remove ·
			☐ Change
	·		🗆 Add
			☐ Remove
			Change
			□ Remove
			Change

,		_
		_
,	· · · · · · · · · · · · · · · · · · ·	_
,		_
		_
		_
		_
		_
		_
		~
	·	
		_
		-
		<u>.</u> `
		c,
Effect	ve date, if other than the date of filing: (ontional)	
Note:	ve date, if other than the date of filing:)5,0207 ited as 1
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earl 90th day after the record is filed.	ier of
Dated	7/31/17	
	11 Coloud 1, Sour	
	Signature of a member or authorized representative of a member	
	Michael Bay Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00