

W4000031021

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W4-31021  
RL

## TRANSMITTAL LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 1314 Newton, 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:

Gary Burchfield

(Name of Person)

1314 Newton, LLC

(Firm/Company)

1009 Simonton Street

(Address)

Key West FL 33040

(City/State and Zip Code)

For further information concerning this matter, please call:

Denise H Harper

(Name of Person)

at ( 305 )

295-7338

(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)

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA

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

1314 Newton, LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on April 22, 2004 and assigned document number L04000031021.

**SECOND:** The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:

ARTICLE V:

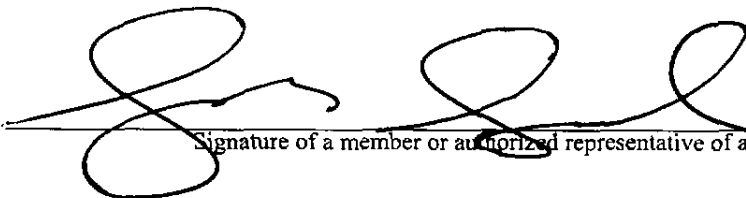
The name and address of managing members/managers are:

Title: MGR  
GARY BURCHFIELD  
1009 Simonton Street  
Key West FL 33040

Title: MGR  
DEBORAH BURCHFIELD  
1009 Simonton Street  
Key West FL 33040

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TALLAHASSEE, FLORIDA

Dated December 31, 2004.

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Gary Burchfield

\_\_\_\_\_  
Typed or printed name of signee

Filing Fee: \$25.00