

LD4000031886

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

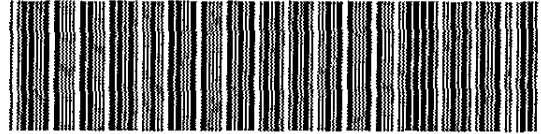
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TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: HOPEWELL BUSINESS CENTER, 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:

CARL LARSON

(Name of Person)

HOPEWELL BUSINESS CENTER, LLC

(Firm/Company)

4314 W. WOODHERE RD.

(Address)

TAMPA, FLORIDA 33609

(City/State and Zip Code)

For further information concerning this matter, please call:

CARL LARSON

(Name of Person)

at (813) 289-3660

(Area Code & Daytime Telephone Number)

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TALLAHASSEE, FLORIDA

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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

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

HOPEWELL BUSINESS CENTER, LLC

(Present Name)  
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 04/27/2004 and assigned  
document number LD4000031886

SECOND: This amendment is submitted to amend the following: To correct the  
Mistake of leaving off the name and address  
of the following two additional  
Managing Members: (PLEASE ADD)

①

ADRIENNE L. LARSON MGRM  
4314 W. WOODMERE RD.  
TAMPA FL, 33609

②

DIANNE L. ROSSI MGRM  
4932 BAYWAY PLACE  
TAMPA, FL, 33629

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TALLAHASSEE, FLORIDA

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Dated August 13, 2007

Carl A. Larson

Signature of a member or authorized representative of a member

CARL A. LARSON

Typed or printed name of signee

Filing Fee: \$25.00