104000085470

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cil	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	





000311317900

04/02/18--01040--023 **25.00



Y SULKER APR 08 2018

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: FLORIDA HICKORY GOLF, 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:
KATHY L. NADDIETZ
PRECISION PRODUCT DEVELOPMENT, LLC
5753 HWY 85 NORTH #4922
CRESTVIEW, FL. 32536 City/State and Zip Code
CRESTVIEW, FL. 32536 City/State and Zip Code KLNAPPIER @ GMA(L. COM) B-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
KATHY NAPOLETS at (727) 70 9 8444 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ Certificate of Status \$\ Certificate of Status & Certified Copy (additional copy is enclosed) \$\ 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

FLORIDA HICKORY GOLT (Name of the Limited Lishility Company) (A Florida Limited Lis	F, LLC (es it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company w Florida document number <u>LOYOOOBSY7O</u> . This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liabili	•
PRECISION PRODUCT DEVEL The new name must be distinguishable and contain the words "Limited Liability	COMENT, LLC y Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	5753 HWY. 85 North #4922 CRESTVIEW, FL 32536
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5753 Hwy. 85 NORTH #4922 CRESTVIEW, FL. 32536
B. If amending the registered agent and/or registered offi registered agent and/or the new registered office address here:	
	L. NAPPIER Hwy 85 North #4922 Enter Morida street address /IEW, Florida FL. 32536 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.

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 = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MAGR	KATHY L. NAPPIER	5753 HWY 85 North #4922 CRESTVIEW, FL 3	Дли 32536
			☐ Remove
			Change
			C Add
			□ Remove
			Change
			C Add
		 [48] c.k=	☐ Remove
		्री 'ठे' 'सर धार 'डे'.	— >>
		1.d) 1.d) 1.d) 1.d)	CLAdd
		dr.	→ □ Remove
			Change
			[] Add
	•		C Remove
			Change
			Add
			Remove
			Change

LOMPARY NAME BECOMES	MRECISION TRODUCT DEVETO
COMPANY NAME BECOMES " KATHY [. NAPPLETE BECAME A	INGR & REGISTERED
A –	
PICHARD Bullock WAS R	Smovet)
THEATHER DUTTE WAS TO	<u> </u>
	% .
	
	- 1 To 1 T
	199
	<u> </u>
3/27/2	010
we date, if other than the date of filing:	(optional) filing or more than 90 days after filing.) Pursuant to 605.0207 (3
If the date inserted in this block does not meet the applicable statuent's effective date on the Department of State's records.	story filing requirements, this date will not be listed as the
ord specifies a delayed effective date, but not an eff	ective time, at 12:01 a.m. on the earlier of:
90th day after the record is filed.	
1 1	
3/29/2018	
3/29/2018	
3/29/2018 Richard C. Suelc Signature of a member or authorized repr	·dc

Page 3 of 3

Filing Fee: \$25.00