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(Re	questor's Name)	
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. PICK-UP	■ WAIT	MAIL
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Cartified Carries	Cartificates	of Status
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COVER LETTER

SUBJECT: HANOVE		ed Liability Company)	
The enclosed Articles of Art	nendment and fee(s) are subn	nitted for filing.	
Please return all correspond	ence concerning this matter t	o the following:	
	TYLER A. GOLD, ESQ.	Olana (Para)	
		(Name of Person)	
	TYLER A. GOLD, P.A.		
		(Firm/Company)	
•	1000 S. PINE ISLAND RE		
•		(Address)	
	PLANTATION, FL 33324		
		(City/State and Zip Code)	
For further information con	cerning this matter, please ca	II:	
TYLER A. GOLD, ESQ.		at (954) 565-5577	
(Name of I	(Name of Person) (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)

MAILING ADDRESS:

TO:

Registration Section Division of Corporations

> 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

HANOVER PARK 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 12/03/2004 and assigned Florida document number L04000087361 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: (Enter Florida street address) 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 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.

New Registered Agent's Signature, if changing 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> Fitle</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM_	JESSE GADDIS	221 W. OAKLAND PARK BLVD. FT. LAUDERDALE, FL 33311	Add Remove
			Add Remove
, <u>-</u>			Add Remove
·			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter cha	nge(s) here: (Attach additional sheets, if necess	ary.)
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Dated <u>JANU</u>	Tu .	der or authorized representative of a member	FIL 09 JAN -5 SECRI NO.
	TYLER A. GOLD, ES	Q.	[T] TT,
	Ty	ped or printed name of signee	(
		Page 2 of 2) 8: 50 STATE ORIDA
		Filing Fee: \$25.00	