

LD4000089785-

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

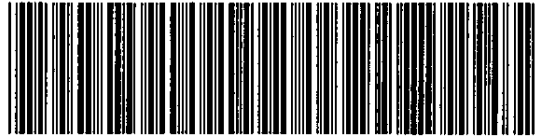
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

NOV 23 2009

EXAMINER

## COVER LETTER

TO: **Registration Section  
Division of Corporations**

SUBJECT: C & C Ocoee, 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:

Hollis L. Henegar

Name of Person

C & C Ocoee, LLC

Firm/Company

2152 14th Circle North

Address

St. Petersburg, FL 33713

City/State and Zip Code

hollyhenegar@designbuild.com

E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Hollis L. Henegar

Name of Person

at ( 727 )

327-1089

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:**  
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

C & C Ocoee, LLC

(A Florida Limited Liability Company)

Page 1 of 2

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>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
S	Clark H. Scherer, III	2152 14th Circle North St. Petersburg, FL 33713	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	CHS Asset Holdings, LLC	2152 14th Circle North St. Petersburg, FL 33713	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Dated November 19, 2009

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

Clark H. Scherer, III  
\_\_\_\_\_  
Typed or printed name of signee