L15000047553

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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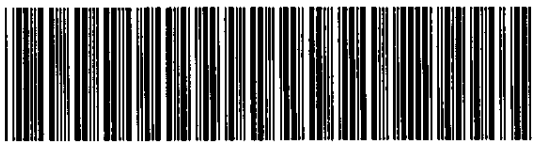

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B. BOSTICK

JUL - 1 2014

EXAMINER

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Bontrager Enterprises, 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:

Elmer D. Bontrager
Name of Person

Firm/Company

4625 Trails Dr
Address

Sarasota, FL 34232
City/State and Zip Code

bontrager@comcast.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elmer D. Bontrager at (941) 343.9388
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:
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

Bontrager Enterprises, 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 05/12/2005 and assigned Florida document number L05000047553.

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: N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: N/A

(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: N/A

New Registered Office Address: _____
Enter Florida street address

_____, **Florida** _____
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.

N/A
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

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

I, Elmer D. Bontrager assign 100% ownership in Bontrager Enterprises LLC, to the Bontrager Trust UAD 04/10/2003

E. Effective date, if other than the date of filing: _____ **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 06/26/2014.

Signature of a member or authorized representative of a member

Elmer D. Bontrager

Typed or printed name of signee

Filing Fee: $25.00

Certification of Trust for the THE BONTRAGER TRUST dated April 10, 2003

This Certification of Trust is signed by all the currently acting Trustees of THE BONTRAGER TRUST dated April 10, 2003, as restated on June 25, 2014, who declare:

1. The Trustmakers are ELMER D. BONTRAGER and M. LOUISE BONTRAGER. The trust is revocable by the Trustmakers, acting jointly and not separately.

2. The Trustees of the trust are ELMER D. BONTRAGER and M. LOUISE BONTRAGER. The signature of one Trustee is sufficient to exercise the powers of the Trustee.

3. The tax identification number of the trust is the Social Security number of either ELMER D. BONTRAGER or M. LOUISE BONTRAGER.

4. Title to assets held in the trust will be titled as:

   ELMER D. BONTRAGER and M. LOUISE BONTRAGER, Trustees of THE BONTRAGER TRUST dated April 10, 2003, and any amendments thereto.

5. An alternative description will be effective to title assets in the name of the trust or to designate the trust as a beneficiary if the description includes the name of at least one initial or successor Trustee, any reference indicating that property is being held in a fiduciary capacity, and the date of the trust.

6. Excerpts from the trust document that establish the trust, designate the Trustee, and set forth the powers of the Trustee will be provided upon request. The powers of the Trustees include the power to acquire, sell, assign, convey, pledge, encumber, lease, borrow, manage, and deal with real and personal property interests.

7. The terms of the trust provide that a third party may rely upon this Certification of Trust as evidence of the existence of the trust and is specifically relieved of any obligation to inquire into the terms of this trust or the authority of my Trustee, or to see to the application that my Trustee makes of funds or other property received by my Trustee.

8. The trust has not been revoked, modified, or amended in any way that would cause the representations in this Certification of Trust to be incorrect.

June 25, 2014

ELMER D. BONTRAGER, Trustee

M. LOUISE BONTRAGER, Trustee

STATE OF FLORIDA)
) ss.
COUNTY OF SARASOTA)

The foregoing instrument was acknowledged before me this day, June 25, 2014, by ELMER D. BONTRAGER and M. LOUISE BONTRAGER, as Trustees, who are personally known to me or who have produced N/A, as identification.

[Seal]

Notary Public
My commission expires: _____

JAMES WILLIAM COLLINS JR
Notary Public - State of Florida
My Comm. Expires Dec 15, 2015
Commission # EE 128805