

LD5000-119853

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

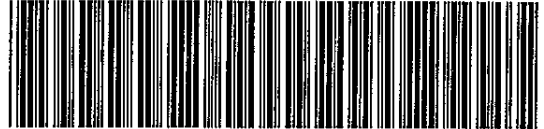
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SECRETARY'S MAIL
FBI

[Handwritten signature]

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HERITAGE LAKE TOURS, 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:

REGINALD E. BALE REGISTERED AGENT
(Name of Person)

pp HERITAGE LAKE TOURS, LLC
(Firm/Company)

230 RUE DE PARESSE
(Address)

TAVARES FLORIDA FL 32778
(City/State and Zip Code)

For further information concerning this matter, please call:

RE BALE at 352 343 4337
(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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

HERITAGE LAKE TOURS, LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 12.15.2005 and assigned
document number LO5000119853

SECOND: This amendment is submitted to amend the following:

ARTICLE V

The name and address of the managing member is

TITLE: MGRM SARAH BALE

1505/11 WEST BURLLEIGH BLVD,

TAVARES, FL. 32778 US

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(MARK A BALE WAS ADDED BY MY MISTAKE AS THE
REGISTERED AGENT. Reginald E. Bale)

I FULLY AGREE WITH THIS AMENDMENT TO ARTICLE V.

MARK A. BALE

Dated MAY 4, 2006

WITH IMMEDIATE EFFECT

Reginald E. Bale
Signature of a member or authorized representative of a member

REGINALD E. BALE
Typed or printed name of signee

Filing Fee: \$25.00 ✓

+ CERTIFICATE OF STATUS \$5.00