

L06000065319

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(Address)

(Address)

(City/State/Zip/Phone #)

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EXAMINER

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: H&B Marina Properties, 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:

Brian M. Becker  
(Name of Person)  
H&B Marina Properties, LLC  
(Firm/Company)  
762 Lake George Drive  
(Address)  
Melbourne, FL. 32940  
(City/State and Zip Code)

For further information concerning this matter, please call:

Brian M. Becker at (321) 271-5113  
(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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H&B Marina Properties, 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 June 28, 2006 and assigned Florida document number L06000065319.

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)

930 Mullet Road  
Cape Canaveral, Fl. 32920

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

930 Mullet Road  
Cape Canaveral, Fl. 32920

**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:

Brian M. Becker

New Registered Office Address:

930 Mullet Road

(Enter Florida street address)

Cape Canaveral

(City)

Florida

32920

(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 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.

Brian M. Becker

(If Changing Registered Agent, Signature of New 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>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Carl B. Straw	3504 Gurrero Drive Melbourne, FL. 32940	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
VP	Carl B. Straw	3504 Gurrero Drive Melbourne, FL. 32940	<input type="checkbox"/> Add <input checked="" 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.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated November 14, 2008

*Brian M. Becker*

Signature of a member or authorized representative of a member

Brian M. Becker

Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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