

LD6000090634

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

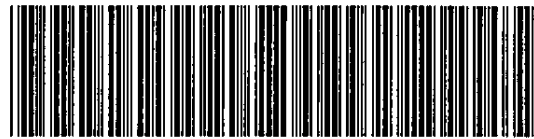
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700081573187

11/13/06--01028--028 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
2006 NOV 13 PM 12:11

[Handwritten signature]

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HURRICORP, 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:

Mitchell Stovring

(Name of Person)

Southwest Professional Service of So. FL, Inc.

(Firm/Company)

13571 McGregor Blvd. #22

(Address)

Fort Myers FL 33919

(City/State and Zip Code)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2006 NOV 13 PM 12:11

For further information concerning this matter, please call:

Mitchell Stovring

(Name of Person)

at (239) 481-4444

(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**

HURRICORP, LLC.

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 09/15/06 and assigned document number L06000090634.


SECOND: This amendment is submitted to amend the following:

ARTICLE II: ADDRESS

Be it resolved that Hurricorp, LLC., organized and operating within the
State of Florida, hereby change their principal office and mailing address
to 4519 SE 16th Place, Suite #109, Cape Coral FL 33904.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2006 NOV 3 PM 12:11

Dated November 1, 2006.



Signature of a member or authorized representative of a member

George Reiff, Mgrm

Typed or printed name of signee

Filing Fee: \$25.00