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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
. (Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
	and Number	
(D0	cument Number)	
Certified Copies	_ Certificates	s of Status
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SECRETARY OF CHARLES DIVISION OF COMPLETE AND DEP

COVER LETTER

Division of Co	rporations			
SUBJECT: 11840 Hidden Oak, 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:				
	Paul A. Barthole			
		(Name of Person)	······································	
Barthole & Rosario				
(Firm/Company)				
		(
12930 SW 128 Street, Suite 102				
(Address)				
Miami, FL 33186				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
Paul A. Bartho	le .	_{at (} 305 ₎ 378-6988		
(Name of Person) (Area Code & Daytime Telephone I		: 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

TO:

Registration Section

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO

SECRETARY OF STATE DIVISION OF CORT DEATIONS

O7 AUG 20 PM 3: 27

ARTICLES OF ORGANIZATION OF

(A Florida Limited Liability Company)

SECOND: This amendment is submitted to amend the following:

PRINCIPAL & MAILING ADDRESSES SHOULD BE:
11291 COWEN COURT LAKE WORTH, FL
Zip code 133449

MGRM PATRICK SCHOMBERG ADDRESSSHOULD BE:
11291 COWEN COURT LAKE WORTH, FL 33449

MEMBER BRIGITTE SCHOMBERG ADDRESS SHOULD BE:
11291 COWEN COURT LAKE WORTH, FL [33449]

Dated 08 14 . 2007.

Signature of a member or authorized representative of a member

PATRICK SCHOMBERG

Typed or printed name of signee

Filing Fee: \$25.00