

L07000073207

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2008 SEP 24 A 9 52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

T. HAMPTON

SEP 25 2008

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: B+H 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:

William R. Harmon
(Name of Person)

B+H Enterprises, LLC
(Firm/Company)

12227 Moose Hollow Dr.
(Address)

Jacksonville, FL 32226
(City/State and Zip Code)

For further information concerning this matter, please call:

William R. Harmon at 904, 955-6814
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

08 SEP 24 PM 4:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

September 18, 2008

WILLIAM R HARMON
12227 MOOSE HOLLOW DR
JACKSONVILLE, FL 32226

SUBJECT: B & H ENTERPRISES, LLC
Ref. Number: L07000073207

We have received your document for B & H ENTERPRISES, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is L04000018085 (LR ENTERPRISES, LLC).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II

Letter Number: 808A00050657

Registration/Qualification Section

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 SEP 24 A 9 52

FILED

B+H 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 6/18/2007 and assigned Florida document number LO7000073207.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

LR Harman Enterprises, LLC

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)

12227 Moose Hollow Dr.
Jacksonville FL 32226

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

12227 Moose Hollow Dr
Jacksonville FL 32226

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:

William R. Harman

New Registered Office Address:

12227 Moose Hollow Dr
(Enter Florida street address)
Jacksonville, Florida 32226
(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 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.

William R Harman
(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>
MGRM	David Beaty	3223 Vinewood Ln Jax Fl 32227	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	LISA D. Harmon	12227 Moss Hollow Dr Jacksonville Fl 32226	<input checked="" 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
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated _____

William B. Harmon
Signature of a member or authorized representative of a member

William B. Harmon
Typed or printed name of signee

2008 SEP 24 A 9:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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