## 3000015616

~ <i>i</i>				
•	(Requ	iestor's Name)		
	·(Addre	ess)		
	(Addre	ess)		
	(City/S	State/Zip/Phone	#)	
PICK-	UP	☐ WAIT	MAIL	
	(Busir	ness Entity Nam	е)	
(Document Number)				
Certified Copies	<b>*</b> ,	Certificates	of Status	

Special Instructions to Filing Officer:

L. SELLERS

AUG 4 2010

**EXAMINER** 

Office Use Only



700183110957

07/12/10--01019--014 \*\*43.75

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: NHFG. LLC Name of Limited Liability Company
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:
Eric L. NANTOH Name of Person
NHFG.LLC
Firm/Company
18755 NW 62nd AU #101
Hialeah, FL 33015  City/State and Zip Code
edaddeo & Hotmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Fric L. NANTON at (305) 409-3556  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee \$ \$55.00 Filing Fee \$ \$60.00 Filing Fee,  Certificate of Status Certified Copy 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



July 15, 2010

ERIC L. NANTON 18755 NW 62ND AVENUE #101 HIALEAH, FL 33015

SUBJECT: NHFG LLC

Ref. Number: L08000015616

We have received your document for NHFG LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return 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) 245-6967.

Letter Number: 810A00017219

Leslie Sellers Regulatory Specialist II

www.sunbiz.org

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NHFG. LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records Liability Company)	<u>s.</u> )
The Articles of Organization for this Limited Liability Compan	y were filed on	and assigned
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and end with the words "Lin" "L.L.C."	nited Liability Company," the designat	ion "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address he		iter the name of the new
Name of New Registered Agent:		<b>5</b> 0 ÷
New Registered Office Address:		
	— Enter Florida stree	SER W
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agen	<u>t:</u>	2: 55
I hereby accept the appointment as registered agent and age the provisions of all statutes relative to the proper and com accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	iplete performance of my duties, a s provided for in Chapter 608, F.S	nd I am familiar with and ` '. Or, if this document is

Page 1 of 2

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>Address</u> Type of Action Title: Name · MGRM ECICA R. NANTON Jubari Russell MOR Remove Cedrina L. Russell ☐ Remove Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member NAUTO N Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00