

(Re	equestor's Name)	
(A.		
(Ac	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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G. MCLEOD

APR 2 2 2008

EXAMINER



700124782967

04/21/08--01018--022 **25.00

SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Hennig Enterpris	ses LLC
	(Name of Limited Liability Company)
The enclosed Articles of Amendme	ent and fee(s) are submitted for filing.
Please return all correspondence co	incerning this matter to the following:
Stace	(Name of Person)
	(Audio of Colory)
<u>Patrio</u>	ck & Robinson, CPA Firm (Firm/Company)
	(Filin/Company)
4029	Atlantic Blvd.
	(Address)
Jack	sonville, FL 32207
	(City/State and Zip Code)
For further information concerning	this matter, please call:
Stacey Norman	at (904) 396-5400
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following	
	00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, entificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
MAILING ADE Registration Sect	ion Registration Section
Division of Corp	orations Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

FILED SECRETARY OF STATE DIVISION OF CORPORATION

ARTICLES OF AMENDMENT 08 APR 21 AM 9: 02 ARTICLES OF ORGANIZATION OF

The Master's Touch Tile & Sur	face Restoration, LLC	de)
(A Flor	bility Company as it now appears on our record rida Limited Liability Company)	<u>us.</u> ,
The Articles of Organization for this Limited Liabili	ity Company were filed on March 26, 2008	and assigned
Florida document number <u>L08000030774</u>		
This amendment is submitted to amend the following	g:	·
A. If amending name, enter the new name of the	endment is submitted to amend the following: mending name, enter the new name of the limited liability company here: g Enterprises, LLC name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation	
Hennig Enterprises, LLC		
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Company," the designate	ation "LLC" or the abbreviation
		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter Florida st	reet address)
	, Flor	ida
_	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regis	stered Agent:	
I hereby accept the appointment as registered ag the provisions of all statutes relative to the propo accept the obligations of my position as register being filed to merely reflect a change in the regi company has been notified in writing of this cha	er and complete performance of my duties, ed agent as provided for in Chapter 608, F stered office address, I hereby confirm that	and I am familiar with and .S. Or, if this document is
	(If Changing Registered Agent, Signature of	f 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:

<u>e</u>			
-	Name	Address	Type of Actio
			∧dd
			Remove
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f ameno	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	
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Filing Fee: \$25.00