

208000072010

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Special Instructions to Filing Officer:

**A. LUNT**

SEP 11 2009

**EXAMINER**

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08/04/09--01018--010 \*\*35.00



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 6, 2009

JOANN B. YANZUK  
13551 SW 103RD STREET  
DUNNELLON, FL 34432

SUBJECT: HEARING MINISTRY, L.L.C.  
Ref. Number: L08000072010

We have received your document for HEARING MINISTRY, L.L.C. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6094.

Agnes Lunt  
Regulatory Specialist II

Letter Number: 209A00027002

HEARING MINISTRY, L.L.C

August 13, 2009

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

Attention: Agnes Lunt

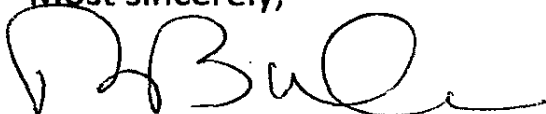
Dear Ms. Lunt:

Thank you for reviewing our paperwork related to the Hearing Ministry,  
L.L.C.

Per your instructions, please find the paper work.

We greatly appreciate your help and expertise.

Most sincerely,

A handwritten signature in black ink, appearing to read 'R. Bitters', written over a horizontal line.

Robert Bitters



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 25, 2009

JOANN B. YANZUK  
13551 SW 103RD STREET  
DUNNELLON, FL 34432

SUBJECT: HEARING MINISTRY, L.L.C.  
Ref. Number: L08000072010

We have received your document for HEARING MINISTRY, L.L.C. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6094.

Agnes Lunt  
Regulatory Specialist II

Letter Number: 509A00028636

## HEARING MINISTRY, L.L.C.

Jo Ann B. Yanzuk  
Program Director  
Toll Free - 877-525-0075

Robert Bitters  
Founder

September 2, 2009

Florida Department of State  
Division of Corporations  
Corporate Records  
P.O. Box 6327  
Tallahassee, FL 32314

Attention: Agnes Lunt  
Regulatory Specialist II

Re: Letter Number 509A00028636  
Reference Number L08000072010

Dear Ms. Lunt:

Thank you for your review of our documents. We are returning this document, along with your correspondence dated August 25, 2009, per your instructions, as we wish to comply with the requirements of Section 608.407, Florida Statutes, which you identified in your letter.

We are sorry for the inconvenience of our not signing this document. Bob Bitters informed me that you and he had a telephone conversation on Monday, August 31, 2009. Per your conversation, please note that I have signed this document.

Again, thank you for your assistance.

Most sincerely,

  
Jo Ann B. Yanzuk  
President, Hearing Ministry

JAY

Attachments (2) - Ms. Lunt's letter of 8/25/09  
Document to be filed

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Hearing Ministry, L.L.C  
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:

Robert Bitters  
Name of Person  
Hearing Ministry, L.L.C.  
Firm/Company  
1064 Ceasars Court  
Address  
Mt. Dora, FL 32757  
City/State and Zip Code  
drbitters@tohear.us  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Bitters at (352) 455-7275  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

Hearing Ministry, L.L.C.

(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 July 25, 2008 and assigned  
Florida document number 408000072010

This amendment is submitted to amend the following:

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

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)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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:

\_\_\_\_\_

New Registered Office Address:

\_\_\_\_\_

Enter Florida street address

\_\_\_\_\_, Florida \_\_\_\_\_

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.*

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>
VP	Robert F. Bitters	1064 Caesars Court Mt. Dora, FL 32757	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Pres	JoAnn B. Yanzuk	13551 SW 103rd Street Dunnellon, FL 34432	<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 \_\_\_\_\_

Signature of a member or authorized representative of a member

Typed or printed name of signee