

# Lo8000015812

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(Requestor's Name)

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(Address)

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(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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2014 APR -3 P 3 15  
BOSTON  
MASS

B. BOSTICK

APR - 4 2014

EXAMINER

March 26, 2014

FL Dept. of State  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: Articles of Amendments

To Whom It May Concern,

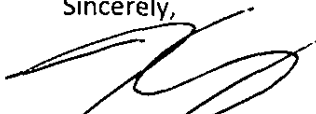
Enclosed you will find Check #2411 in the amount of \$250.00 for the following (10 @ \$25 ea.) Articles of Amendment:

Rod Holdings, LLC	L05000092747
Woodmere Investment Management, LLC	L06000005199
Woodmere Realty Advisors, LLC	L11000003024
Woodmere Capital Group, LLC	M11000005951
New Bern Investments Management, LLC	L12000047676
New Bern Lender, LLC	L12000047699
New Bern Investments, LLC	L12000048057
New Bern Lender Management, LLC	L12000047688
New Bern Investment Phase II, LLC	L13000162951 (Incls EIN)
H & S Hytop, LLC	L08000075812

These Articles of Amendment are simply to change the Registered Agent to myself. I have also provided the EIN# for New Bern Investments Phase II, LLC which was previously applied for.

If you have any questions or need additional information please do not hesitate to contact me.

Sincerely,



Henry Rodriguez

2014-03-26 10:15  
10:15 AM  
MAR 26 2014

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: H & S Hytop, 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:

Henry Rodriguez

Name of Person

H & S Hytop, LLC

Firm/Company

P.O. Box 579

Address

Osprey, FL 34229

City/State and Zip Code

hrodriguezsdcc@comcast.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brenda Creech

Name of Person

at (941) 312-5996

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" 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**

H & S Hytop, 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 08/07/08 and assigned  
Florida document number L08000075812.

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: Henry Rodriguez

New Registered Office Address: 1561 Harbor Drive

Enter Florida street address

Sarasota, Florida 34239

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 605, 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.*

*[Signature]*  
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

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**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated march 24, 2014.

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Henry Rodriguez

\_\_\_\_\_  
Typed or printed name of signee

**Page 3 of 3**

**Filing Fee: \$25.00**

2014 MAR 26 PM 3:14  
FILED