108000083907

(Requ	iestor's Name)	·		
(Addr	ess)			
(Addr	ess)			
(City/s	State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Busi	ness Entity Nar	ne)		
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Fi	ling Officer:			

Office Use Only



500283594905



03/22/16--01014--028 ***30.00

MILLABASSES STANS

2816 MAR 21 AH 9: 43

K.SALY EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Hasselfree Property Maintenance, 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:
Thomas C. Freitas Name of Person
Hasselfree Property Maintenance, LLC
7433-A State Road 21
Keystone Heights FL 32656 City/State and Zip Code
Hasselfreeine @ amail. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Thomas C. Freitas at 772, 579 - 9345 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 & Certificate of Status Certified Copy (additional copy is enclosed) \$25.00 Filing Fee & 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PILED 2016 MAR 21 PM 2:29

91312008 The Articles of Organization for this Limited Liability Company were filed on and assigned Florida document number L 0 80000 839 07 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Town Terrace Enter new principal offices address, if applicable: Jensen Beach, FL (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

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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being or removed from our records:				
MGR=	Manager Authorized Member		2016 HAR 21 PK 2:29	
<u>Title</u>	<u>Name</u>	Address	ALLAMATOR CO.	Type of Action
			SOSFE FLORID.	Add
				Remove
				☐ Change
				Add
				☐ Remove
				Change
				Add
				□ Remove
				Change
			□ Remove	
				Change
		<u> </u>		Add
				□ Remove
				☐ Change
	· 			🗆 Add
				Remove
				

· · · · · · · · · · · · · · · · · · ·	2016 MAR 21 PM 2:29
	2016 MAR 21 PH 2:29 ELAHASSE FIRM
	TLAHASSET FLORIDA
	CLAHASSE FIORING
	THASSE FINE
	(((((((((((((((((((
	·
	
,	
	<u> </u>
· · · · · · · · · · · · · · · · · · ·	
	· -
ffective date, if other than the date of filing: ((optional)
an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days ote: If the date inserted in this block does not meet the applicable statutory filing requirement	rs after fitting.) Pursuant to 605.020. ts. this date will not be listed as
ocument's effective date on the Department of State's records.	
a wassed specifies a delayed effective data but an effective time at 17	.01 a m an tha andian a
e record specifies a delayed effective date, but not an effective time, at 12: The 90th day after the record is filed.	or a.m. on the earlier o
The John day diter the record is med.	
NO 2 -21 1- 201+	
ated 1100K(41) 15 , 20Kg.	
Marine O L	
1. nonco tieros	
Signature of a member of authorized representative of a member	
Thomas C. Freitas	

Page 3 of 3

Filing Fee: \$25.00