

L08 000116666

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

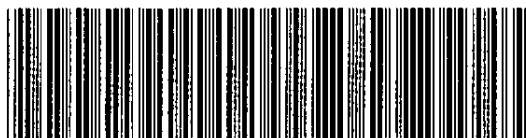
(Business Entity Name)

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10 JAN 28 PM 3:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W
J. BRYAN JAN 12 2009

J. BRYAN

JAN 29 2009

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 12, 2010

ROSANE HUTCHINS
RR XPRESS CONSULTING LLC
484 BELINA DR ATP 1407
NAPLES, FL 34104

SUBJECT: RR XPRESS CONSULTING, LLC.
Ref. Number: L08000116666

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TALLAHASSEE, FLORIDA

We have received your document for RR XPRESS CONSULTING, LLC. and your check(s) totaling \$61.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

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) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 410A00000838

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RR XPRESS CONSULTING 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:

ROSANE HUTCHINS

Name of Person

RR XPRESS CONSULTING LLC

Firm/Company

484 BELINA DR APT 1407

Address

NAPLES FL 34104

City/State and Zip Code

rosanehut@hotmail.com

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

For further information concerning this matter, please call:

Rosane Hutchins

Name of Person

at (239)

692-6677

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☒ \$60.00 Filing Fee,
Certificate of Status &
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

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TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

RR XPRESS CONSULTING, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 01/01/2009 and assigned
Florida document number L08000116666RR.

This amendment is submitted to amend the following:

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

LEAL HUTCHINS SERVICES, LLC

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)

484 BELINA DR

APT 1407

NAPLES FLORIDA 34116

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

SAME AS ABOVE

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:

N/A

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>
_____	_____	_____	<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

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Services from money services to light handyman work

Dated _____, _____.

Rosane Hutchins
Signature of a member or authorized representative of a member

ROSANE HUTCHINS
Typed or printed name of signee

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TALLAHASSEE, FLORIDA