L09000002917

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EXAMINER

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COVER LETTER

TO: Registration So Division of Cor			
SUBJECT:	LHM Indus	trial Supplies LLC	
GODGEOT.		ted Liability Company	······
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	The contract of the contract o
		Nancy J Hall	2009 NOV 19 A
		Name of Person	Transfer of the second
	LHM	I Industrial Supplies LLC	
		Firm/Company	AM IO: 33
		12077 Maryland Ave	φπ ω
		Address	
	F	Punta Gorda Fl 33955	
		City/State and Zip Code	
	G: E-mail address: (1	affy1971@gmail.com to be used for future annual report notification	
For further information of	concerning this matter, please of	·	,
	Nancy Hall	ai \	7083
Name o	of Person	Area Code & Daytime Telep	phone Number
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 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 A Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LHM In	idustrial Supplies LL	<u>.C</u>	<u></u>	
(Name of the Limited Liabi	lity Company as it now appe da Limited Liability Company	ears on our records.		
(Artion)	au Emmou Emonity Company	,		
The Articles of Organization for this Limited Liability	y Company were filed on	December 28,20	08. and assign	ned .
Florida document number L09000008917			₹ ≤	*******
2917	 '		00 to	1
			Ho >	
This amendment is submitted to amend the following	•		AM IO: 33 OF STATE E. FLORIDA	F 3
•				***************************************
A. If amending name, enter the new name of the l	<u>imited liability company h</u>	<u>ere</u> :	33 B	
			<i>7</i> 2	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Com	pany," the designation	"LLC" or the abb	reviation
Enter new principal offices address, if applicable:	<u> </u>		· · · · · · · · · · · · · · · · · · ·	
(Principal office address MUST BE A STREET AD	DRESS)			
				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
	•			
	1988 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984	······································		
		_		
B. If amending the registered agent and/or rep		our records, enter	the name of t	the new
registered agent and/or the new registered office a	<u>aaress nere</u> :			
Name of New Registered Agent:		·		
New Registered Office Address:				
	I	Enter Florida street a	ddress	
		, 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Christina M Czerepak	12077 Maryland Ave Punta Gorda FI 33955	Add Remove
			Add Remove
			Add Remove
			Add Remove
***************************************			Addition of the control of the contr
			Add Add
D. If amen	ding any other information, enter o	change(s) here: (Attach additional sheets, if necessor	න්වා සි සි
			
Dated	November 16 ,	2009 .	
	, V	ember or authorized representative of a member Nancy J Hall	
	,	Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00