L0900006583

' (Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)	_					
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status	_					
Special Instructions to Filing Officer.						
·						





200191982722

03/30/11--01005--005 **25.00

2011 MAR 29 PM 4: 46

J. SAULSBERRY EXAMINER MAR 3 0 - 2011

NOB

COVER LETTER

TO:

P.O. Box 6327 Tallahassee, FL 32314

TO:	Registration Sec Division of Corp		1				
SUBJE	CCT:	н	D TURF, LLC				
	Name of Limited Liability Company						
The end	closed Articles of A	mendment and fee(s) are sub	omitted for filing.				
Please	return all correspon	dence concerning this matter	to the following:				
JEREMY HURSE					_		
			Name of Person				
HD TURF, LLC							
	Firm/Company				-		
	9960 ARNOLD ROAD						
Address					- 		
JACKSONVILLE, FL 32246					AEC AEC	2011 MAR 29	
	City/State and Zip Code				AHA	MAR	**************************************
		E mail address: (hdturfjax@gmail.com to be used for future annual report notification	<u>, , , , , , , , , , , , , , , , , , , </u>	ARY	29	10 71R 12mg
5 6 .				ж			FTD
For furt	her information coi	ncerning this matter, please c	all:		STATE	÷.	gran markey ga
JEREM	Y HURSE		at (904) 708-2187		D.F.	94: 44	
	Name of I	Person	Area Code & Daytime Tel	ephone Numbe	er	·	
Enclose	ed 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)	Certifie	ate of St	atus &	osed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327		ion Section of Corporations	STREET/COURIER A Registration Section Division of Corporation Clifton Building				

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

н	D TURF, LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lim	ompany as it now appeanted Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Con	01/21/2009	and assigned	
Florida document number			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	d liability company her	<u>'e</u> :	
N/A			
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Compa	ny," the designation "	LLC" or the abbreviatio
Enter new principal offices address, if applicable:	N/A		
(Principal office address MUST BE A STREET ADDRES	<u>SS)</u>		
			7A 20 20 20 20 20 20 20 20 20 20 20 20 20
Enter new mailing address, if applicable:	N/A		CRETA 2
(Mailing address MAY BE A POST OFFICE BOX)			
			F 3 - 1
B. If amending the registered agent and/or registere registered agent and/or the new registered office addres			The names of the nev
Name of New Registered Agent: N/A			
New Registered Office Address:	Fn	ter Florida street add	
	En	er i toriuu sireet uut	u vaa
	City	, Florida	Zip Code
	Cny		esp coue

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> **Address** Type of Action JOSEPH SYKES **MGRM** 3716 TIMUCUA TRAIL **✓** Add Remove JACKSONVILLE, FL 32277 ☐ Add ☐ Remove DbA 🔲 ☐ Remove Add Remove □Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) MARCH 12 2011 Dated Signature of a member or authorized representative of a member JEREMY HURSE Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00