L09000034359

(Requestor's Name)				
(Address)	100161464571			
(Address)	100101-10-101			
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL	10/13/0901014003 **30.00			
(Business Entity Name)	grange of the state of the stat			
(Document Number)	2009 OCT 13 SECRETARY FALLAHASSEI			
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A. LUNT				

OCT 14 2009

EXAMINER

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COVER LETTER

TO:	Registration So Division of Con		•			
SUBJE	·CT.		Enterprises, LLC	•		
	process		ted Liability Company			
The end	closed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please 1	return all correspo	ondence concerning this matter	to the following:			
			David P. Hendler			
			Name of Person			
	Pennard Enterprises, LLC					
			Firm/Company			
		13	3000 Sandy Pine Lane		2009 OCT 13 SECRETARY TALLAHASSI	
			Address		OCT AHA	7
•			Clermont, FL 34711		HAY SSE	_ _ _
			City/State and Zip Code		E P	П
		Pe	nnardLLC@gmail.com to be used for future annual report notif	ication)	CR STA F	
For fur	ther information of	concerning this matter, please of	·		= 19 16 19	
• ., •		id D. Hondlor	250	598-5933		
		vid P. Hendler	at (352) Area Code & Daytim			
Enclose	ed is a check for t	the following amount:				
\$25	.00 Filing Fee	▼\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed	l) Certified	ite of Status &	sed)
	Regist Division P.O. B	LING ADDRESS: ration Section on of Corporations lox 6327 assee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle		

ARTICLES OF AMENDMENT TO . ARTICLES OF ORGANIZATION OF

Pennard Ente (Name of the Limited Liability Compa (A Florida Limited I	erprises, LLC ny as it now appears on our records liability Company)	<u>)</u>	
The Articles of Organization for this Limited Liability Company Florida document numberL0900034359	were filed on04/09/200	9 and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company," the designat	ion "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	13000 Sandy Pine Lane	ZE ZE	
(Principal office address MUST BE A STREET ADDRESS)	Clermont, FL 34711	OC AH	
Enter new mailing address, if applicable:	13000 Sandy Pine Lane	THE PM:	
(Mailing address MAY BE A POST OFFICE BOX)	Clermont, FL 34711	I: 19	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office 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, <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 Type of Action **Title Address** Name **Judy Fuss** MGRM. 2849 Carrie Ct _ Add √ Remove Kennesaw, GA 30144 David P. Hendler MGRM 13000 Sandy Pine Lane ✓ Add Clermont, FL 34711 Remove ☐ Add ☐ Remove □ Add Remove Remove i D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Oct. 9 . 2009 Dated ____ Signature of a member or authorized representative of a member David P. Hendler Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00