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TALLAHASSEE, FLORIDA

B. BOSTICK

JUL 29 2013

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

Head High Holdings, LLC

SUBJECT: _____
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:

Robert L. Kenny, Jr.

Name of Person

Head High Holdings, LLC

Firm/Company

110 Cumberland Park Drive, Suite 305

Address

St. Augustine, FL 32095

City/State and Zip Code

robert@headhighnetworks.com

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

For further information concerning this matter, please call:

Claudia Kenny

904 553-1603

at ()

Name of Person

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

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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>
			☐ Add
			☐ Remove
			☐ Add
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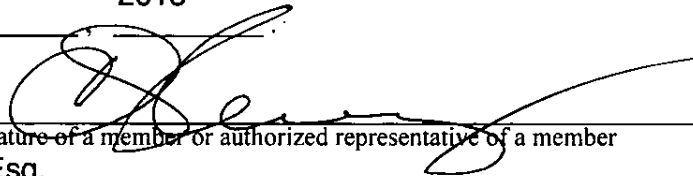
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TALLAHASSEE, FLORIDA

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

Dated July 25 2013



Signature of a member or authorized representative of a member

Claudia S. Kenny, Esq.

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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