

LB9 0000 43156

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

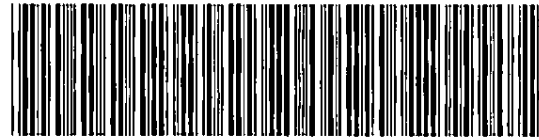
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2024 JAN -5 AM 9:01  
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TALLAHASSEE, FL

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AB

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Heidt Design, 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:

Michael Caron  
Name of Person  
Heidt Design, LLC  
Firm/Company  
5904-A Hampton Oaks Parkway  
Address  
Tampa, FL 33610  
City/State and Zip Code  
mcaron@heidtdesign.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Caron at (813) 253-5311  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|--|--|--|

**Mailing Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

2024 JAN -5 AM 9:01

Heidt Design, LLC

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

STATE  
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 05/04/2009 and assigned  
Florida document number L09000043156.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain 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)**

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

**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:

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Michael G. Peters	5904 Hampton Oaks Parkway	<input type="checkbox"/> Add
		Suite A	<input checked="" type="checkbox"/> Remove
		Tampa, FL 33610	<input type="checkbox"/> Change
MGR	Patricia M. Castellano	5904 Hampton Oaks Parkway	<input checked="" type="checkbox"/> Add
		Suite A	<input type="checkbox"/> Remove
		Tampa, FL 33610	<input type="checkbox"/> Change
MGR	Boyan V. Pargov	5904 Hampton Oaks Parkway	<input checked="" type="checkbox"/> Add
		Suite A	<input type="checkbox"/> Remove
		Tampa, FL 33610	<input type="checkbox"/> Change
MGR	Michael W. Dmytryk	5904 Hampton Oaks Parkway	<input checked="" type="checkbox"/> Add
		Suite A	<input type="checkbox"/> Remove
		Tampa, FL 33610	<input type="checkbox"/> Change
MGR	Eric N. Francis	5904 Hampton Oaks Parkway	<input checked="" type="checkbox"/> Add
		Suite A	<input type="checkbox"/> Remove
		Tampa, FL 33610	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

**E. Effective date, if other than the date of filing:** May 25, 2023 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated May 25 2023

Hubert Caron

Signature of a member or authorized representative of a member

Michael A. Caron

Typed or printed name of signee

**Filing Fee: \$25.00**