

209000051668

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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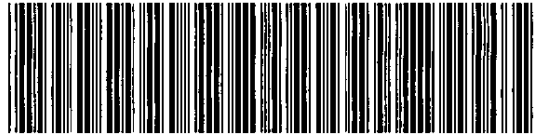
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**A. LUNT**

JUN 19 2009

**EXAMINER**

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2009 JUN 18 PM 4:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: HALL OF FAME KO BARBERSHOP, 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:

KORREY HILL  
Name of Person

HALL OF FAME KO BARBERSHOP, LLC  
Firm/Company

9557 NW 28<sup>TH</sup> STREET  
Address

CORAL SPRINGS, FL 33065  
City/State and Zip Code

K034@VZW.BLACKBERRY.NET  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KORREY HILL at (954) 263 1448  
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

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

HALL OF FAME KO BARBERSHOP, LLC  
(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 5/27/2009 and assigned  
Florida document number L09000051668

This amendment is submitted to amend the following:

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

HALL OF FAME BARBERSHOP 7, LLC

The new name must be distinguishable and end with 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)

9557 NW 28 STREET  
CORAL SPRING FL 33065

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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TALLAHASSEE, FLORIDA

**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:

KORREY HILL

New Registered Office Address:

9557 NW 28 STREET

Enter Florida street address

CORAL SPRINGS, Florida 33065  
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.

Korrey Hill  
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

Title	Name	Address	Type of Action
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MGRM	EILEEN HILL	9557 NW 28 STREET CORAL SPRINGS FL 33065	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
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MBR	ANDRAE LABARR	11649 NW 47 DR CORAL SPRINGS FL 33076	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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TALLAHASSEE, FLORIDA

2009 JUN 18 PM 4:04

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated

6/16, 2009

Korrey Hill

Signature of a member or authorized representative of a member

KORREY HILL

Typed or printed name of signee