Division of Corporations Public Access System

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L. SELLERS

To:

Division of Corporations

Fax Number : (850)617-6383

AUG 10 2009

From:

Account Name : COHEN & GRIGSBY, P.C.

Account Number : I20030000042
Phone : (239)390-1912
Fax Number : (239)390-1901

**EXAMINER** 

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

HFW II, LLC

Certificate of Status		0
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Electronic Filing Menu

Corporate Filing Menu



## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	HEW II, LLC		
( <u>Name of the Limited Liah</u> (A Flor	ullity Company as It now appeared Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liabili	ty Company were filed on	July 14, 2009	and assigned
Florida document numberL09000067727	, 		
This amendment is submitted to amend the following	g:		
A. If amending name, enter the new name of the	limited liability company he	re:	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Comp	any," the designation "Ll	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AL	ODRESS)		
Enter new meiling address if applicable.			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX			
Indiang dualess MAI BE A TOST OF THE BOX			
B. If amending the registered agent and/or re registered agent and/or the new registered office a		our records, <u>enter th</u>	e name of the new
Name of New Registered Agent:			
New Registered Office Address:		nter Florida street addr	ess
	, Florida		
_	City	, Florida,	Zip Code
<u>New Registered Agent's Signature, If changing Regist</u>	ered Agent:		
I hereby accept the appointment as registered age the provisions of all statutes relative to the propel accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this chan	r and complete performance d agent as provided for in C tered office address, I herebj	of my duties, and I an hapter 608, F.S. Or, ij	n f
·	If Changing Registered Ago	ent, Signature of New Regi	
	Page 1 of 2		8 <b>8</b>

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
MGR	Pamela O. Hamel	1400 Gulf Shore Blvd. N. Unit 202 Naples, FL 34102	Add Z Remove
MGR .	George Hamel	1400 Gulf Shore Blvd. N. Unit 202 Naples, FL 34102	Add Remove
			Add Remove
D. If amendin	ng any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	
***************************************			<del>-</del> -
			O9 AUG
Dated	Junue	M. Roller or authorized representative of a member	ASSEE PL
_	Lynne M. Rad	er Authorized Representative	OFISIATE FILORIDA E FLORIDA

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