(Requestor's Name)		
(Address)		
(Address)		
(Addiedd)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
W09-40445 A. LUNT		
A. LUNI		
OCT 28 2009		
EXAMINER		

Office Use Only

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09/08/09--01034--017 **160.00



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 9, 2009

JEAN MARIE HERZOG 2161 AQUI ESTA DR. PUNTA GORDA, FL 33950

SUBJECT: HERZOG HULL MAINTENANCE L.L.C.

Ref. Number: W09000040445

We have received your document for HERZOG HULL MAINTENANCE L.L.C. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

To receive a refund, please submit a written request to the attention of the undersigned. Be sure to include the name of the person or entity the check should be made payable to and the address to which it should be mailed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Letter Number: 709A00029877

Agnes Lunt Regulatory Specialist II

Division of Companyations DO DOV 6997 Tallahagasa Florida 99914



September 30, 2009

JEAN HERZOG 2161 AQUI ESTA DR. PUNTA GORDA, FL 33950

SUBJECT: HERZOG HULL MAINTANCE LLC

Ref. Number: L09000071702

We have received your document for HERZOG HULL MAINTANCE LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Letter Number: 209A00031809

Agnes Lunt Regulatory Specialist II

Division of Corporations - P.O. ROY 6327 Tallahasson Florida 32314



October 9, 2009

JEAN HERZOG 2161 AQUI ESTA DR. PUNTA GORDA, FL 33950

SUBJECT: HERZOG HULL MAINTANCE LLC

Ref. Number: L09000071702

We have received your document for HERZOG HULL MAINTANCE LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Letter Number: 609A00032574

Agnes Lunt Regulatory Specialist II

Division of Corporations - P.O. ROY 6327 - Tallahassaa Florida 32314

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Hevzog Hull Maintenance Page 27 The Name of Limited Liability Company				
The enclosed Articles of Amendment and fee(s) are submitted for filing.				
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:				
Jean Herzog Name of Person				
Herzea Hull Maintenance				
2161 aque Esta Dr. Address				
Punta Dada- F1 33950 City/State and Zip Code				
E-mail address: To be used for future annual report notification)				
For further information concerning this matter, please call:				
Team Men 209 at (94) 505-9449 Name of Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount:				
\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \$\ \text{Certified Copy (additional copy is enclosed)} \text{\$\text{Certified Copy (additional copy is enclosed)}} \$\t				

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



(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	and assigned
Florida document number	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li The new name must be distinguishable and end with the w "L.L.C."	Wain tena	e designation "LLC" or the abbreviation
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADD	DRESS) 2161	agui Cstalor Gorda FL 33900
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or reg registered agent and/or the new registered office ac		cords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Flo	rida street address
	. Florida	
	City	, Florida 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, 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 David Herzzy Richard Hegy Remove MAdd Remove ☐ Add Remove $\neg Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representa

Page 2 of 2

Filing Fee: \$25.00