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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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M/

(Business Entity Name)

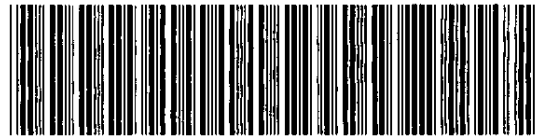
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2010 JAN 19 AM 10:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

JAN 21 2010

EXAMINER

TO: Registration Section
Division of Corporations

SUBJECT: _____ Je
Name of L

The enclosed Articles of Amendment and fee(s) are
Please return all correspondence concerning this ma

Par _____

_____ E-mail address

For further information concerning this matter, please

_____ Jeff Hardin
Name of Person

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee ☒ \$30.00 Filing Fee &
Certificate of Status

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

ER LETTER

_____, LLC
ility Company

for filing.

llowing:

_____, Jeff Hardin

_____, Name of Person

_____, m/Company

_____, omas Dr. #130

_____, Address

_____, Beach, FL 32408

_____, Site and Zip Code

_____, n@gmail.com

_____, (for future annual report notification)

_____, (850) 896-2304

_____, Area Code & Daytime Telephone Number

☐ \$25.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLE 1 AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2010 JAN 19 AM 10:06

Jeff Hardin, LLC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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 Oct. 26, 2009 and assigned
Florida document number L09000103521.

This amendment is submitted to amend the following:

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

Jeffrey Scott Hardin, 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)

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 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

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

Dated 1/16, 2010.

Signature of a member or authorized representative of a member

Jeffrey Scott Hardin

Typed or printed name of signee

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 2010 JAN 19 AM 10:06
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA