L10000020485

(Requestor's Name)	
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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	_
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10 APR -1 PM 1:40
SECRETARY OF STATE
TAIL AHASSEF, FLORID

J. BRYAN

APR -2 2009

EXAMINER

COVER LETTER

то:	Registration S Division of Co					
SUBJ	ECT:		Homes led Liability Company	<u></u>		
The e	nclosed Articles o	of Amendment and fee(s) are sub	mitted for filing.			
Please	return all corresp	pondence concerning this matter	to the following:			
			Michael Hansen Name of Person			
			Hansen Homes Firm/Company		SECT ALL SECT	T
		453	N.W. 38th Ave. Address		PR-1 PR-1 HASSE	
		Deerfield B 2 Michael H	each, F1. 33442 City/State and Zip Code ansen and Tip Code o be used for future annual report notifica	m (tion)	APR-1 PH 1:40 ECRETARY OF STATE LLAHASSEE, FLORIDA	
For fu	rther information	concerning this matter, please c	·	,		
1	Michael Name	Hansen of Person	at (954) 263-59° Area Code & Daytime T	74 Telephone Number		
Enclo	sed is a check for	the following amount:				
⊡ \$2	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	
	MAI	LING ADDRESS:	STREET/COURIE	R ADDRESS:		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Hansen	Homes Ll	L		RIGHT
(<u>Name of the Limited Li</u> (A Fl	ability Company as orida Limited Liabili	it now appears on our ty Company)	r records.)	
The Articles of Organization for this Limited Liab Florida document number	ility Company were	filed on <u>2-23</u>	-2010	and assigned
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of the	e limited liability o	company here:		
The new name must be distinguishable and end with to "L.L.C."	he words "Limited Li	ability Company," the	designation "LLC"	' or the abbreviation
Enter new principal offices address, if applicab	le:			<u> </u>
(Principal office address MUST BE A STREET)	<u> </u>			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>			
B. If amending the registered agent and/or registered agent and/or the new registered offic		address on our rec	ords, <u>enter the</u>	name of the new
Name of New Registered Agent:	Michael	Hansen		
New Registered Office Address:		England Film	ida atuan - II	
Enter Florida street address				
	Cit	y	_, Florida 2	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.

f Changing Registered Agent, Signature of New Registered Agent

If afnending 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 = Ma MGRM = 1	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Michael Hunsen	Deerfield Beach, F1.33442	Add Remove
MGRM	Michael Hunse	US3 N.W. 38th AVE. Doerfield Beach, Fr. 33442	Add Remove
			Add Remove
	•		Add Remove
			Add Remove
			Add Remove
D. If amer	nding any other information, enter	change(s) here: (Attach additional sheets, if necessar	ry.)
			10 APR - 1 PM
Dated	March 29th Michael (2)	2010	ARY OF STATE
	Signature of a r	member or authorized representative of a member Hansen Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00