10000079131

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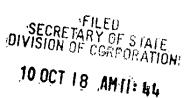
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COVER LETTER

TO: Registration S Division of Co	Section orporations				
SUBJECT:	Har	rtsaw, LLC			
Sobject.		ted Liability Company			
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	· · · · ·		
Please return all corresp	condence concerning this matter	to the following:			
		J. Theodore Schatt			
		Name of Person			
	The Schatt Law Firm, PLLC				
	Firm/Company				
		2355 SE 17th Street			
		Address			
,		Ocala, FL 3471			
		City/State and Zip Code			
	E-mail address: (Schatt@schattlaw.com to be used for future annual report n	otification)		
For further information	concerning this matter, please of	call:			
	Ted Schatt	at (_352)	789-6520		
Name	of Person	Area Code & Day	ytime 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 enclo	Seed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Regis	LING ADDRESS: tration Section	Registration Se	URIER ADDRESS:		
Division of Corporations P.O. Box 6327		Division of Cor Clifton Buildin	g		
Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



	Hartsaw, LLC	• •	
(Name of the Limited Linki	Ity Company as it now appear	s on our records	
(A Florid	lity Company as it now appear la Limited Liability Company)	i di records.)	
The Articles of Organization for this Limited Liability	Company were filed on	July 27, 2010 and assigned	
Florida document numberL10000079131	·		
This amendment is submitted to amend the following:	:		
A. If amending name, enter the new name of the li	imited liability company her	<u>e</u> :	
N	1&H Group, LLC		
The new name must be distinguishable and end with the vert.L.C."	words "Limited Liability Compa	ny," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or reg		our records, enter the name of the new	
registered agent and/or the new registered office a	ddress here:		
Name of New Registered Agent:	- Victoria		
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 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 = N	Managing Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Willie Carl Merrell	1812 Antilles Place Orlando, FL 32806	✓ Add Remove
			Add Remove
			Add Remove
			Add Remove
			☐ Add ☐ Remove
			AddRemove
D. If amen	ding any other information, o	enter change(s) here: (Attach additional sheets, if	necessary.)
_		·	SECRETARY IVISION OF CO
	October 14	. 2010	ANTI: 44
Dated	October 14		₽ 00m
	Signature	of a member or authorized representative of a member	r
		J. Theodore Schatt	
	······································	Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00