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(Requestor's Name)

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(City/State/Zip/Phone #)

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PICK-UP

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MAIL

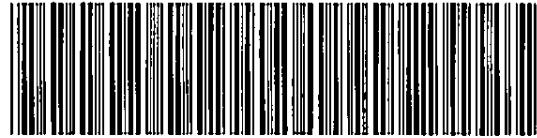
(Business Entity Name)

(Document Number)

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17 NOV 13 PM 4:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. LEGGETT
NOV 13 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 27, 2017

HUGO BOESCH
621 TORREY OAKS CT
LONGWOOD, FL 32750 US

SUBJECT: BOESCH AND BOESCH LLC
Ref. Number: L10000081746

We have received your document for BOESCH AND BOESCH LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PAGE 3 IS REQUIRED WITH AUTHORIZED NAME AND SIGNATURE.

Please return the corrected original and one copy of 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) 245-6051.

Judy A Leggett
Regulatory Specialist II
Registration Section

Letter Number: 017A00021787

2017 NOV 13 PM 3: 53

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Boesch and Boesch LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Hugo Boesch

Name of Person

Boesch and Boesch LLC

Firm/Company

621 Torrey Oaks Ct

Address

Longwood FL 32750

City/State and Zip Code

joesedelweiss@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Hugo Boesch

Name of Person

at (407)

Area Code

865 1758

Daytime 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 enclosed)

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

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**

Boesch and Boesch LLC

(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 L10000081746.

This amendment is submitted to amend the following:

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

Boesch and Boesch LLC

The new name must be distinguishable and contain 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:

Hugo Boesch

New Registered Office Address:

621 Torrey Oaks Ct

Enter Florida street address

Longwood

Florida 32750

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member


<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Boesch Erika		<input type="checkbox"/> Add
		621 Torrey Oaks Ct, Longwood FL	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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17 NOV 13 PM 4 16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.


Signature of a member or authorized representative of a member

Hugo Boesch
Typed or printed name of signee