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T. HAMPTON

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EXAMINER

# **COVER LETTER**

T2: Registration Section, Division of Corporations
SUBJECT: AEWITT REMTY, UCC 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:
Brian Hewith
Hewith Realty Firm/Company
752 Blanding BlvD Ste 123
Ovange Paril Fr. 37065  City/State and Zip Code  brian & Vew H Sells 10 m  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:  BYLAN JEWIH at 904 505-7651  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, 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

SECRETARY OF STATE DIVISION OF CORPORATIONS

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HEURIT R	EMTY	uc		
(Name of the Limited Li. (A Fi	ability Company a orida Limited Liabi	s it now appears on our reality Company)	xords.)	
The Articles of Organization for this Limited Liabi	ility Company we	re filed on <u>8//6/</u>	and assigned	
This amendment is submitted to amend the following	ing:			
A. If amending name, enter the new name of th	e limited liability	company here:		
The new name must be distinguishable and end with th "L.L.C."	he words "Limited	Liability Company," the de-	signation "LLC" or the abbreviation	
Enter new principal offices address, if applicabl	le:			
(Principal office address MUST BE A STREET A	ADDRESS)			
	. –			
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 office		address on our record	ls, <u>enter the name of the new</u>	
Name of New Registered Agent:				
New Registered Office Address:		יי די ד		
	Enter Florida street address			
-		, F	lorida	
	C	'' <i>y</i>	zip Coae	

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:

<u>Title</u>	<u>Name</u>		Address	Type of Action
<u>MGem</u>	Brian	P. Covewan	752 Blanding HIVD Ste Draw Parli FZ 32065	Add Remove
MGEM	bnon	K HewiTT	Orange landers Bloom Ste 123 Orange landers 32065	Add Remove
<del></del>				Add Remove
<del></del>				Add Remove
				Add Remove
				Add Remove
D. If amendi	/23/16	rmation, enter change(s	here: (Attach additional sheets, if necessary.)  authorized representative of a member	SECRETARY OF STATEORS DIVISION OF CORPORATIONS TO NOV 29 M 3-04

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Filing Fee: \$25.00