## L10000106452

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(Address)				
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(City/State/Zip/Phone #)				
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(Business Entity Name)				
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SECRETARY OF STATE
SECRETARY OF STATE

C. LEWIS

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EXAMINER

## **COVER LETTER**

		COATSIVE DESTRICT	
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TO: Registration S			•
Division of Co	orporations	$e^{it} \hat{x}^{t}$	•
,			
SUBJECT:	I&L Planning and De	evelopment Consult	ants, LLC
	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
		James Hackett	
		Name of Person	<del> </del>
		radio of Lordon	
	H&L Planning a	and Development Con	sultants, LLC
		Firm/Company	
	612 (	N. Orange Ave. Suite A	<del>\14</del>
		Address	
		L 'I EL 00400	
		Jupiter, FL 33469 City/State and Zip Code :	<del>'</del>
•	,	•	
	F-mail address: (	ames@hlplanning.net to be used for future annual repo	rt notification)
•		·	in nonneurony
For further information	concerning this matter, please of	call:	·
			000 0004
	mes Hackett	at (_561_)	222-9284
Name	of Person	Area Code & I	Daytime Telephone Number
England is a shoot for t	sho fallowing amount.		
Enclosed is a check for t	_		
\$25.00 Filing Fee	\$30.00 Filing Fee &	\$55.00 Filing Fee &	\$60.00 Filing Fee,
	Certificate of Status	Certified Copy	Certificate of Status &
		(additional copy is en	closed) Certified Copy (additional copy is enclosed)
			(manifolial copy to ellelosed)

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

FILED

12 MAY 10 PM 3: 13

H&L Planning and Development Consultants, LIGHT ARY OF STATE (Name of the Limited Liability Company as it now appears on our records.) A Florida Limited Liability Company) 10/12/2010 and assigned The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_\_ L10000106452 Florida document number \_\_\_\_ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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: James Hackett Name of New Registered Agent: 612 N. Orange Ave. Suite 14A New Registered Office Address: Enter Florida street address Jupiter City 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.

g Registered Agent, Signature of New Registered Agent

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If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Shannon Lee	7753 Nemec Drive S West Palm Beach, FL 33406	AddRemove
	<del> </del>		Add Remove
<del></del>			Add Remove
			Add Remove
			Add Remove
·	<del></del>		Add Remove
D. If amend	ling any other information, enter	change(s) here: (Attach additional sheets, if necessa	nry.)
			FIL 12 MAY 10 SEGRETARN TALLAHASS
Dated	S.7.12 Signature of a ri	rember of authorized representative of a member	
	V	James Hackett Typed or printed name of signee	STATE STATE
	•	-^L	

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Filing Fee: \$25.00