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SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 JUN 20 PM 2:28

T. HAMPTON

JUN 21 2011

EXAMINED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Lehmann Forster Manufacturing, 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:

Dawn M. Pavlik

Name of Person

Lehmann Manufacturing, LLC

Firm/Company

200 North Star Ct.

Address

Sanford, Florida 32771

City/State and Zip Code

dawn@lehmannmfg. com

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

For further information concerning this matter, please call:

Dawn Pavlik

Name of Person

at (407)

322-8511

Area Code & 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**

"FILED"
SECRETARY OF STATE
DIVISION OF CORPORATIONS

11 JUN 20 PM 2:28

Lehmann Forster Manufacturing, 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 2/18/2011 and assigned
Florida document number L1000106720.

This amendment is submitted to amend the following:

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

Lehmann Manufacturing, LLC

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)

Dawn M. Pavlik

200 North Star Ct

Sanford, Florida 32771

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

200 North Star Ct.

Sanford, Florida 32771

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:

New Registered Office Address:

200 North Star Ct

Enter Florida street address

Sanford

Florida

32771

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 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:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Dawn M. Pavlik	200 North Star Ct. Sanford, FL 32771	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	William Forster	244 South Military Trail Deerfield Beach, FL 33442	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Walter Lehmann	200 North Star Ct Sanford, FL 32771	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated April 1, 2011


Signature of a member or authorized representative of a member
Dawn M. Pavlik
Typed or printed name of signee

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