110000128010

(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

Division of Cor	
SUBJECT:	AKE WORTH HURRICANE LLC Name of Limited Liability Company
*	Name of Limited Liability Company
•	
The enclosed Articles of	Amendment and fee(s) are submitted for filing.
Please return all correspo	ondence concerning this matter to the following:
	JAMES J. DONOVAN Name of Person
	Name of Person
	JEMES J. DONOVAN CPA, PA. Firm/Company 3046 SOUTH CONCRESS AVENUE Address LAKE WORTH FLORIDA 33461 City/State and Zip Code
·	3046 South Congress Avenue Address
•	LAKE WORTH FLORIDA 33461
	BOBSMG C COMCAST. NET E-mail address: (to be used for future annual report notification)
For further information c	oncerning this matter, please call:
JAMES J.	20NOVAN at (561) 641- 9550 Ferson Area Code & Daytime Telephone Number
Name o	: Person Area Code & Daytime Telephone Number
Enclosed is a check for th	te following amount:
\$25.00 Filing Fee	S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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



March 18, 2011

JAMES J. DONOVAN 3046 SOUTH CONGRESS AVENUE LAKE WORTH, FL 33461

SUBJECT: LAKE WORTH HURRICANE, LLC

Ref. Number: L10000128010

We have received your document for LAKE WORTH HURRICANE, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return 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) 245-6967.

Letter Number: 211A00006714

Leslie Sellers Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	RRICANE	LLC	
(<u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appea ability Company)	ers on our records.)	
The Articles of Organization for this Limited Liability Company vi Florida document number	were filed on	12/14/2010	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company he	re:	
The new name must be distinguishable and end with the words "Limite "L.L.C."	ed Liability Comp	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:	<u></u>		
(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 registered agent and/or the new registered office address here:		our records, enter t	he name of the new
Name of New Registered Agent:			٠
New Registered Office Address:		ACL	3 =
	Er	nter Florida street AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	ess PR
	City	, Floridado	Zip Coder
New Registered Agent's Signature, if changing Registered Agent:		FLORI	я О
I hereby accept the appointment as registered agent and agree the provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	te performance ovided for in C	of my duties, and I a hapter 608, F.S. Or, i	m familiar with and if this document is

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 Title <u>Name</u> Address . Type of Action DAVID MGRM MARSH 4787 MORGAN ROAD ∏Add Remove ONETHA ☐ Add ☐ Remove _ ☐ Add Remove Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Signature of a member or authorized representative of a member

Dated_

CRAIG E. ZILL
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00