L1100000 9859

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SECRETARY OF STATE
SECRETARY SEE, FLORID:

J. BRYAN

FEB 2 3 2011

EXAMINER

COVER LETTER

TO:	Registration Sec Division of Corp				
SUBJECT: Hest			Builders, LLC		
OCDO.			ted Liability Company		
			•	•	
The en	nclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspon	ndence concerning this matter	to the following:		
			Chris Hester		
			Name of Person		75 th
		ŀ	Hester Builders, LLC		强要
			Firm/Company		器器厂
			3035 NE Canal Ave		11 FEB 22 PM 1: 35 SECRETARY OF STATE SECRETARY OF STATE
		Address		FLOOT IS	
		Jensen Beach, FL 34957 City/State and Zip Code			REF. S
					·
		cap	tainhester@yahoo.com		
			to be used for future annual report	notification)	
For fu	rther information co	oncerning this matter, please c	all:		
	CI	nris Hester	at (772 _.)	215-1475	
	Name of	Person	Area Code & Da	nytime Telephone Number	
Enclos	sed is a check for th	e following amount:			
\$2.	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enc.	losed) Certified	te of Status &
	Registra Divisio P.O. Bo	NG ADDRESS: ation Section in of Corporations ox 6327 ssee, FL 32314	Registration S Division of Co Clifton Buildi	orporations	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Or	
	,	
Hes	ter Builders, LLC	
(Name of the Limited Liabili	ty Company as it now appears on a Limited Liability Company)	our records.)
(A Florida	Limited Liability Company)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
The Articles of Organization for this Limited Liability	Company were filed on	our records.) 1/24/2011 and assigned 35
Florida document numberL11000009859		
	 -	Or O
This amendment is submitted to amend the following:		v
A. If amending name, enter the new name of the lir	nited liability company here:	
The new name must be distinguishable and end with the w "L.L.C."	ords "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 ADL	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
maning maness man BE AT OST OFFICE BOX)		
B. If amending the registered agent and/or regi	istered office address on our r	ecords, enter the name of the new
registered agent and/or the new registered office ad	<u>dress here</u> :	
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:		
	Enter F	lorida street address
		, Florida
	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 Type of Action **Title** <u>Name</u> Address Abel Padilla-Ramirez MGRM 14627 sw Martin Ave Indiantown, FL, 34956 Remove Abel Badilla-Ranirez MGRM \prod Add 14627 sw Martin Ave √ Remove Indiantown, FL, 34956 ☐ Add Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Correcting the spelling to members name. 2/16/10 Dated Signature of a member or authorized representative of a member Chris Hester Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00