# L110000 71274

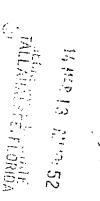
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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4. STAVETS MAR 1 4 2014

#### **COVER LETTER**

TO: **Registration Section Division of Corporations** 

## GRAND WOODWORKING, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all corresp	ondence concerning this matter	to the following:			
	Neil Heuer				
		Name of Person			
		Firm/Company	<u>.                                    </u>		
	2385 Trade	Center Way Ste	e 200		
	<del></del>	Address	<del></del>		
	Naples FL 3	4109			
		City/State and Zip Code			
	neilheuer@gmail.com  E-mail address: (to be used for future annual report notification)				
For further information	concerning this matter, please c	all:			
Neil Heuer		<sub>at</sub> 239 , 206-3	3495		
Name	of Person		ne Telephone Number		
Enclosed is a check for t	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

GRAND WOODWORKING, LLC.	
(Name of the Limited Liability Company as it now app (A Florida Limited Liability Compan	<u>pears on our records.</u> ) 1y)
The Articles of Organization for this Limited Liability Company were filed on Florida document number <u>L11000071274</u>	6/17/2011 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company	<u>/ here:</u>
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)	- Ac - 14
Enter new mailing address, if applicable:	:
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
	200 da
	DA S
B. If amending the registered agent and/or registered office address registered agent and/or the new registered office address here:	on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
Enter	Florida street address
	Florida

#### 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 605, 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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M $AMBR = A$	lanager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	THERESA MARTIN	2385 TRADE CENTER WAY	
		SUITE 200	■ Remove
		NAPLES FL 34109	
<del></del>			🗆 Add
			□ Remove
		<u></u>	
			☐ Remove
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			Remove
			Add
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			□ Remove

υ,	li ameno	ling any other	information, ente	er change(s) here	: (Attach additional sh	neets, if necessary.)
	_					
Е.			than the date of f ecific, cannot be prior to d by the Florida Depar		led date and cannot be more	(optional) than 90 days after
	Dated					

Page 3 of 3

Filing Fee: \$25.00