

L120000009603

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

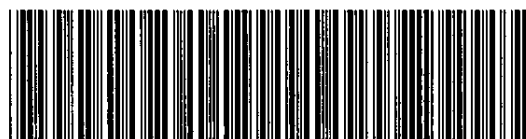
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12 JUN 18 PM 3:27

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tucker JV, LLC
Name of Limited Liability Company

FILED
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DIVISION OF CORPORATIONS
12 JUN 18 PM 3:27

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

Please return all correspondence concerning this matter to the following:

Jeffery S Hills

Name of Person

Tucker JV, LLC

Firm/Company

2801 W. Busch Blvd.

Address

Tampa, FL 33618

City/State and Zip Code

jhills@hillseng.com

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

For further information concerning this matter, please call:

Phil DiRosa

Name of Person

at (813)

340-2656

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**

Tucker JV, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JUN 18 PM 3:27

The Articles of Organization for this Limited Liability Company were filed on 01/20/2012 and assigned
Florida document number L12000009603.

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 "LLC."

Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

2801 W Busch Blvd

Suite 102

Tampa, FL 33618

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

2801 W Busch Blvd

Suite 102

Tampa, FL 33618

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:

Jeffery S Hills

New Registered Office Address:

2801 W. Busch Blvd, Ste 102

Enter Florida street address

Tampa

City

Florida

33618

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.

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Jeffery S Hills
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>
MGRM	Jeffery S Hills	5509 West Gray Street	<input type="checkbox"/> Add
		Suite 101	<input checked="" type="checkbox"/> Remove
		Tampa, FL 33609	
MGRM	Jeffery S Hills	2801 W Busch Blvd	<input checked="" type="checkbox"/> Add
		Suite 102	<input type="checkbox"/> Remove
		Tampa, FL 33618	
			<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 June 8th, 2012



Signature of a member or authorized representative of a member
Jeffery S Hills

Typed or printed name of signee