

L12000079424

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

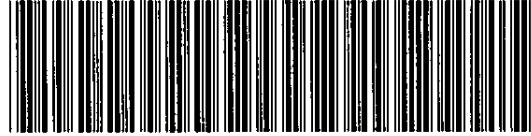
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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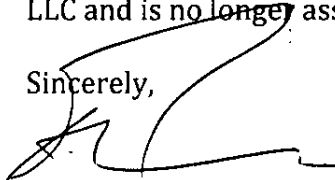
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: FAMILY TIES TWO, LLC

To Whom It May Concern,

Please remove Loring P. Evans as a Managing Member of the above-mentioned LLC. The purpose for this amendment is that Mr. Evans no longer holds an interest in the LLC and is no longer associated.

Sincerely,

A handwritten signature in black ink, appearing to read 'Ronald Hink', with a stylized flourish extending from the end.

Ronald Hink  
Managing Member  
FAMILY TIES TWO, LLC  
888 East Las Olas Blvd, Ste # 704  
Fort Lauderdale, FL 33301  
954-649-0901  
[ronhink@gmail.com](mailto:ronhink@gmail.com)

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** FAMILY TIES TWO, 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:

RONALD HINK  
Name of Person

FAMILY TIES TWO, LLC  
Firm/Company

888 EAST LAS OLAS BLVD #704  
Address

FORT LAUDERDALE, FL 33301  
City/State and Zip Code

ronhink@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RONALD HINK at (954) 649-0901  
Name of Person 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

TO  
ARTICLES OF ORGANIZATION  
OF

\_\_\_\_\_  
(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 6/14/2012 and assigned  
Florida document number L12000079424.

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: N/A

**(Principal office address MUST BE A STREET ADDRESS)**

Enter new mailing address, if applicable: N/A

**(Mailing address MAY BE A POST OFFICE BOX)**

**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: N/A

New Registered Office Address: \_\_\_\_\_

Enter Florida 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 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.*

N/A  
If Changing Registered Agent, Signature of New Registered Agent

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	EVAUS, LORING P.	888 EAST LAS OLAS BLVD #704	<input type="checkbox"/> Add
		Fort Lauderdale, FL 33301	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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2015 JUL 2 00 AM  
CLERK OF SUPERIOR COURT  
FLORIDA

FILED

2015 JUL 20 AM 8:24  
SECURITY OF STATE  
TALLAHASSEE FLORIDA

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated

7/24/15

Signature of a member or authorized representative of a member

RONALD Hink

Typed or printed name of signee