

LR000082397

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

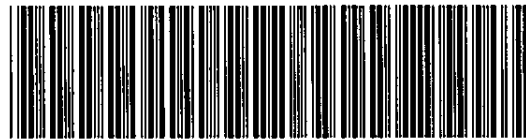
(Business Entity Name)

(Document Number)

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

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ALABAMA  
TALLAHASSEE, FLORIDA

DEC 16 2014

BRUCE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 3, 2014

STEVEN W. LEDBETTER  
STEVEN W. LEDBETTER, P.L.  
229 PENSACOLA ROAD  
VENICE, FL 34285

SUBJECT: HARNER ASSET MANAGEMENT, LLC  
Ref. Number: L12000082397

We have received your document for HARNER ASSET MANAGEMENT, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

Limited Liability Companies are not corporations. Limited Liability Companies are unique business entities with special characteristics and attributes formed under Chapter 605, Florida Statutes. Corporations, on the other hand, are formed under Chapter 607, Florida Statutes, and possess other distinctive traits and characteristics. Consequently, limited liability company documents cannot contain any references/terms which may implicate the entity is a corporation. Please delete any references to the term "corporation" or the like from your document.

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) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 414A00023439

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: HARNER ASSET MANAGEMENT, 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:

STEVEN W. LEDBETTER

Name of Person

STEVEN W. LEDBETTER, P.L.

Firm/Company

229 PENSACOLA ROAD

Address

VENICE, FL 34285

City/State and Zip Code

CORP@SWLLAW.COM

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

For further information concerning this matter, please call:

STEVEN W. LEDBETTER

Name of Person

941 at (    )

Area Code

256-3965

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)

*See attached letter dated 11/2/14*

**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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**HARNER ASSET MANAGEMENT, LLC**

(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 06/21/2012 and assigned  
Florida document number L12000082397.

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 "L.L.C."

**Enter new principal offices address, if applicable:**

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

209 LOUELLA LN  
NOKOMIS, FL, 34275

**Enter new mailing address, if applicable:**

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

209 LOUELLA LN  
NOKOMIS, FL, 34275

**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:

STEVEN W. LEDBETTER

New Registered Office Address:

229 PENSACOLA ROAD

Enter Florida street address

VENICE

City

Florida 34285

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.*

  
**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 = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Stephen L. Harner, Ttee	209 Louella Lane	<input checked="" type="checkbox"/> Add
		Nokomis, FL 34285	<input type="checkbox"/> Remove
MGR	Stephen L. Harner	829 Robert	<input type="checkbox"/> Add
		Venice, FL 34285	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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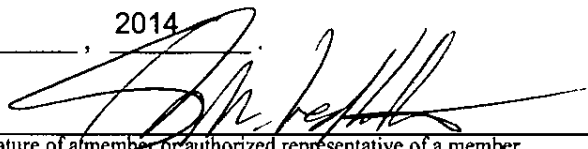
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated Nov. 25, 2014

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

STEVEN W. LEDBETTER, ESQ.

\_\_\_\_\_  
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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