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## **COVER LETTER**

ŤO: Registration Section Division of Corporations

Charles Huether Trustee, 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:

George L. Consoer, Jr.

Attorney at Law

Firm/Company

3427 McGregor Blvd.

Ft. Myers, Fl. 33901

City/State and Zip Code

glconsoer@aol.com

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

For further information concerning this matter, please call:

George L. Consoer, Jr. 239 337-2504

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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Charles Huether Trustee, LLC		
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on ou Liability Company)	r records.)
The Articles of Organization for this Limited Liability Compar	ny were filed on Novemb	er 13, 2012 and assigned
Florida document number L12000142751		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ability company here:	
HFT Investments, LLC		
The new name must be distinguishable and end with the words "Liu"L.L.C."	mited Liability Company," the	e designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	**************************************	
(Principal office address MUST BE A STREET ADDRESS)		<u></u>
Enter new mailing address, if applicable:	*	# 19 5
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address be		cords, enter the name of the ney
registered agent and/or the new registered office address in	<del>71.7.</del>	
Name of New Registered Agent:		
		The state of the s
New Registered Office Address:	Entar Flo	rida street address
	Biller Filo.	тик этон инигоз
	City	, Florida
	City	zip Couc

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 = Ma MGRM = 1	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Add
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			Add Remove

November 16 2012
X & C .
Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00