## U300065107

| (Requestor's Name)                      |           |
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| (City/State/Zip/Phone #)                |           |
| PICK-UP WAIT                            | MAIL MAIL |
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| (Business Entity Name)                  |           |
|   |           |
| (Document Number)                       |           |
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| Certified Copies Certificates of S      | tatus     |
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## **COVER LETTER**

TQ:

Registration Section **Division of Corporations** 

Hines/Irvin Development Company, 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:

Tommy D. Permenter, Jr., Esq.

Name of Person

The Permenter Law Firm, P.A.

Firm/Company

2201 S.E. 30th Avenue, Suite 202

Address

Ocala, Florida 34471

City/State and Zip Code

tommy@permenterlaw.com

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

For further information concerning this matter, please call:

Tommy D. Permenter, Jr., Esq. at (352) 622-1811

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

| Hines/Irvin Development Compa   |   |                                |
|---|---|--------------------------------|
| (Name of the Limited Liability) (A Florida  | ity Company as it now appears on our record<br>a Limited Liability Company) | <u>s.</u> )                    |
| The Articles of Organization for this Limited Liability   | Company were filed on May 2, 2013   | and assigned                   |
| Florida document number L13000065107  |   |                                |
|   | <del></del> -   |                                |
| This amendment is submitted to amend the following:   |   |                                |
| A. If amending name, enter the new name of the lin  | mited liability company here:   |                                |
|   |   |                                |
| The new name must be distinguishable and end with the w "L.L.C."                                | ords "Limited Liability Company," the designa                               | tion "LLC" or the abbreviation |
| Enter new principal offices address, if applicable:   |   |                                |
| (Principal office address MUST BE A STREET ADL  | DRESS)  |                                |
|   |   | 3770 83                        |
|   |   |                                |
| Enter new mailing address, if applicable:   |   |                                |
| (Mailing address MAY BE A POST OFFICE BOX)  |   | 2 1                            |
|   |   | भीरी सक                        |
|   |   |                                |
| B. If amending the registered agent and/or registered agent and/or the new registered office ad |   | nter the name of the ne        |
| registered agent and/or the new registered office ad  | dress here:   | <u>.</u>                       |
| Name of New Registered Agent:   |   |                                |
| New Registered Office Address:  |   |                                |
|   | Enter Florida street address  |                                |
|   | , Flori   | da                             |
|   | 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 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 = Manager MGRM = Managing Member

| <u>Title</u> | <u>Name</u>     | Address               | Type of Action          |
|--------------|-----------------|-----------------------|-------------------------|
| MGR          | Mark M. Irvin   | 16850 S. Hwy 441      | Add                     |
|              |                 | Suite 304             | Remove                  |
|              |                 | Summerfield, FL 34491 | _                       |
| MGR          | Thomas S. Hines | 16910 S. Hwy 441, #20 | 6 🗸 Add                 |
|              |                 | Summerfield, FL 34491 | Remove                  |
|              |                 |                       | Add Remove  Add  Remove |
|              |                 |                       | Add                     |
|              |                 |                       | Add                     |

| D. If ame | ending any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
|-----------|---|
| -         |   |
| -         |   |
| -         |   |
| _         |   |
| ated      | June 21. 2013.  |
|           | The Shine   |
|           | 6ignature of a member of authorized representative of a member                                |
|           | Thomas S. Hines   |
|           | Typed or printed name of signee   |

Page 3 of 3

Filing Fee: \$25.00

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