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SECRETARY OF STATE



AUG - 5 2013 J. BRYAN

COVER LETTER

TO: Registration Se Division of Corp			
SUBJECT:	on HANCOCK CA	bine + Installs, L.L. ed Liability Company	(C) = = 1
	Name of Limit	ed Liability Company	SECRETARIO
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	SEE OF PA
Please return all correspo	ndence concerning this matter	-	FILE PH 2: 46 SECRETARY OF STATE SECRETARY OF STATE
	JASON HA	Name of Person	
	Jasen A	Name of Person Ancock CAbine + Inst. Firm/Company	11/3 L.L. C.
		Address Lot M-	
	Bandenton,	FL. 34203 City/State and Zip Code	
4	E-mail address: (10	o be used fat future annual report notification	on)
For further information c	oncerning this matter, please ca	all:	
A Son Name o	Hancock f Person	at (<u>505</u>) <u>410 - 099</u> Area Code & Daytime Tel	lephone Number
Enclosed is a check for the	ne 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

JASON HANCOCK CA.	binet Install	s. L.L. C.
Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on ou Liability Company)	rrecords.)
The Articles of Organization for this Limited Liability Company	were filed on May	29, 2013 and assigned
Florida document number <u>L 130000 78203</u> .	,	,
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
NA		
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Company," the	designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		ALCE OF THE PROPERTY OF THE PR
(Principal office address MUST BE A STREET ADDRESS)	N/A	- 50 N M
		mag 3 C
Enter new mailing address, if applicable:		To P.
(Mailing address MAY BE A POST OFFICE BOX)	N/A	5m
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		ords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flor	rida 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 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 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>	Name	Address	Type of Action
MGRM	DAVID William David William	1911 5# St. W Apt F	🔀 Add
		Address UR. 1911 5th St. W Apt F BRAdenton, FL 34205	Remove
			
	 		Add
			Remove
			POPE THE STATE OF STATE
		## \$20 \$20 \$20 \$20 \$20 \$20 \$20 \$20 \$20 \$20	Add
			PRemote 2: 46
			Add
			Remove
			Add
			Remove
			_
			Add
			Remove

D. İfan	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	,
Dated	7-31-20/3 , 2013 .
	Signature of a member or authorized representative of a member
	JASON HANCOCK Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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SECRETARY OF STATE
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