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COVER LETTER

TO: Registrati

Registration Section
Division of Corporations

James Hutchinson 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:

Judith Ottosen

Name of Person

Firm/Company

5781 Lee Blvd 208-426

Address

Lehigh Acres FI 33971

City/State and Zip Code

judith.tallpoppy@me.com

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

For further information concerning this matter, please call:

Judith Ottosen

,,239<u>,</u>5655747

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

James Hutchinson LLC		
(<u>Name of the Limited Liability</u> (A Florida l	Company as it now appears on our records, Limited Liability Company))
The Articles of Organization for this Limited Liability C	Company were filed on 06/06/2013	and assigned
Florida document number L13000082535	'	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ited liability company here:	
The new name must be distinguishable and end with the wor "L.L.C."	rds "Limited Liability Company," the designation	on "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	RESS)	
		<u> </u>
		55 F T
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
D. If amounding the appropriate of a count and/our anniety);;·
B. If amending the registered agent and/or regist registered agent and/or the new registered office add		er the name of the new
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·
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 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
MGRM	Judith Ottosen	5781 Lee Blvd 208-426 Leigh Acres FI 3397	1 🖌 Add
			Remove
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			- Add
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). If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
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(The state of the s
\	Signature of a member or authorized representative of a member
\	James Hutchinson
	Typed or printed name of signee

or printed name of sigi

Page 3 of 3

Filing Fee: \$25.00

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