L13000132938

(Re	questor's Name)	
(Add	dress)	
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(Cit	y/State/Zip/Phon	e #)
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SECKETARY OF SHALL ON DIVISION OF COSPORATION

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COVER LETTER

TO:

Registration Section **Division of Corporations**

HERMANN PROPERTIES 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:

DAN NAGY
Name of Person
Firm/Company
715 NE 23 TERRACE
Address
POMPANO BEACH FL 33062
City/State and Zip Code
DANIMPEX95@YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 $\text{at} \underbrace{(954)}_{\text{Area Code}} \underbrace{434\text{-}4811}_{\text{Daytime Telephone Number}}$

Name of Person

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

HERMANN PROPERTIES LL	_C		
(Name of the Limited Li (A F	iability Company as it now appears on our records.) Iorida Limited Liability Company)		
The Articles of Organization for this Limited Liability Florida document number <u>L13000132938</u>	ity Company were filed on 09/19/2013	and assigned	I
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	e limited liability company here:		
The new name must be distinguishable and end with the words		abbreviation "L.L.C."	•
Enter new principal offices address, if applicable			
(Principal office address MUST BE A STREET A	DDRESS)	- + 9	
			.
		亞 新育	3 3 4
Enter new mailing address, if applicable:			. ,, 2, <u>1</u> -1
(Mailing address MAY BE A POST OFFICE BOX	X)	2 54	iler i
	<u> </u>		
		<u> </u>	-
B. If amending the registered agent and/or registered agent and/or the new registered office		the name of th	e new
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	Tiladda		
-	, Florida	7in Coda	

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
MGRM	ARMIN G. FLOERKE	715 NE 23 TERRACE	Add
		POMPANO BEACH FL 330	62 □ Remove
MGR	DAN NAGY	715 NE 23 TERRACE	
		POMPANO BEACH FL 3306	62 □ Remove
			□ Remove
			SECRETARY DIVISION OF CO.
			□ Remove
<u> </u>			Add
			☐ Remove

	ling any other information, e				
	<u></u> -				
					
he effecti	date, if other than the date of the date o	rior to date of receipt or	filed date and c	cannot be more than	(optional) 90 days after
he effecti the date th		rior to date of receipt or	filed date and c	cannot be more than	
The effecti the date th	ve date must be specific, cannot be pr	rior to date of receipt or	filed date and c	cannot be more than	
The effecti	ve date must be specific, cannot be pris document is filed by the Florida Do	rior to date of receipt or	·		90 days after

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Filing Fee: \$25.00