L13000174206

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JAN - 9 2013 **T. HAMPTON**

COVER LETTER

TO: Registration Section **Division of Corporations**

SUBJECT:

STONEHEDGE 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:

Stephen M. Stone

Name of Person

Law Offices of Stephen M. Stone

725 N. Magnolia Avenue

Orlando, FL 32803

City/State and Zip Code

smstonelaw@cfl.rr.com

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

For further information concerning this matter, please call:

Stephen M. Stone

at $(\frac{407}{\text{Area Code}}) \frac{423\text{-}7910}{\text{Daytime Telephone Number}}$

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

STONEHEDGE PROPERTIES, LLC	
(Name of the Limited Liability Company as it now appears on our reco (A Florida Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liability Company were filed on December 18 Florida document number L13000174206	3, 2013 and assigned
This amendment is submitted to amend the following:	ZOIL JAN SECRE
A. If amending name, enter the new name of the limited liability company here:	AHASS
The new name must be distinguishable and end with the words "Limited Liability Company," the desi "L.L.C."	
Enter new principal offices address, if applicable:	ORA F.
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our records registered agent and/or the new registered office address here:	, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida st	reet address
Pil-	

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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 = Manager AMBR = Authorized Member **Type of Action** <u>Title</u> **Address** <u>Name</u> 725 N. Magnolia Avenue **CYNTHIA STONE MRGM** Orlando, Florida 32803

		
		(optional) se more than 90 days after filing.) (605.0207
ffective date is listed, the date m		
December 27	nust be specific and cannot b	

Typed or printed name of sign

Page 3 of 3

Filing Fee: \$25.00

