



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2017 OCT 13 AM 9:23

September 15, 2016

MICHAEL LEATHERS HEWETT
802 5TH ST.
CLERMONT, FL 34711

SUBJECT: HEWETT HOME SERVICES, LIMITED LIABILITY COMPANY
Ref. Number: L14000169127

We have received your document for HEWETT HOME SERVICES, LIMITED LIABILITY COMPANY and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name GEM OF THE HILLS, LLC is unavailable please choose alternate name.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott
Regulatory Specialist II

Letter Number: 516A00019781

FILED

16 OCT 13 PM 1:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

O: **Registration Section
Division of Corporations**

SUBJECT: HEWETT HOME SERVICES LIMITED LIABILITY COMPANY
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:

MICHAEL LEATHERS HEWETT
Name of Person

GEM OF THE HILLS, LLC
Firm/Company

802 5th St.
Address

CLERMONT, FL 34711
City/State and Zip Code

GEM OF THE HILLS LLC@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHAEL LEATHERS HEWETT at (352) 217-0072
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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TALLAHASSEE, FL
SECRETARY OF STATE

TO
ARTICLES OF ORGANIZATION
OF

HEWETT HOME SERVICES LIMITED LIABILITY COMPANY

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on OCTOBER 30 2014 and assigned Florida document number L14000169127.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

~~GEM OF THE HILLS, LLC~~ GEM OF THE HILLS CONSTRUCTION, LLC
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

802 5th ST.

CLERMONT, FL 34711

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

802 5th ST.

CLERMONT, FL 34711

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

MICHAEL LEATHERS HEWETT

New Registered Office Address:

802 5th ST.

Enter Florida street address

CLERMONT

City

, Florida

34711

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 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

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MICHAEL LEATHERS HEWETT	802 5 th ST. CLERMONT 34711	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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STATE OF FLORIDA
TALLAHASSEE

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E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated SEPTEMBER 7, 2016.



Signature of a member or authorized representative of a member

MICHAEL LEATHERS HEWETT

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA