

L14000193547

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

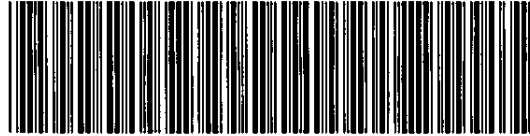
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100271804611

04/20/15--01022--016 **25.00

FILED
15 APR 20 PM 1:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Stivers APR 29 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Benchmark General Contractors of South Florida
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 Hancock

Name of Person

Benchmark General Contractors of S. Florida

Firm/Company

10501 SW 49th Pl

Address

Cooper City, FL 33021

City/State and Zip Code

D. Statewide@gmail.com

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

For further information concerning this matter, please call:

Dan Hancock

Name of Person

at (954)

Area Code

512-8644

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

We want our new name to be
Hancock Construction LLC
Thank you!

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Benchmark General Contractors of South Florida LLC
(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 2/8/15 and assigned
Florida document number CL1400193543

This amendment is submitted to amend the following:

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

Hancock Construction LLC

The new name must be distinguishable and end with 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)

10501 SW 49th Place
Cooper City FL 33328

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

10501 SW 49th Place
Cooper City FL 33328

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:

New Registered Office Address:

Enter Florida street address

City

Florida

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.

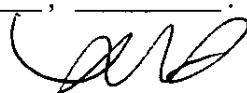
[Signature]
If Changing Registered Agent, Signature of New Registered Agent

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 4/15/2015



Signature of a member or authorized representative of a member

Frances Hancock

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
15 APR 20 PM 1:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA