## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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## COVER LETTER

TO:	Registration Se Division of Cor			
SUBJEC	Hammer	Haag Trailers, LLC		
SUBJEC		Name of Lim	ited Liability Company	<del></del>
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		Brian W. Bennett, E.	squi <b>re</b>	
			Name of Person	······································
		Page, Eichenblatt &	Bennett, P.A.	
Firm/Company				<del> </del>
214 East Lucerne Circle				
			Address	
		Orlando, FL 32801		
		<del></del>	City/State and Zip Code	······································
		bbennett@floridalaw	online.com to be used for future annual report not	(Nation)
For furth	ner information c	oncerning this matter, please c	•	meanon)
Brian '	W. Bennett		407 386-1900 Area Code Daytim	)
<del></del>	Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed	d is a check for th	ne following amount:		
\$23.	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)
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section on of Corporations ox 6327 assee, FL 32314	STREET/COUR Registration Sectle Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 37	on rations enter Circle

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2815 MAY -6 AN 9: 10 SECRETARY OF STATE TALLAHASSEE, FLORIDA

Hammer Haag Trailers, LL0			
(Name of the Limits	ed Liability Company as it nov (A Florida Limited Liability Co	ompany)	
The Articles of Organization for this Limited Li Florida document number L15000008912	ability Company were filed	ed on 01/15/2015 and assigned	
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	the limited llability com	ipany here:	
The new name must be distinguishable and and with the	words "Limited Liability Compt	pany," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applica	able:		
(Principal office address MUST BE A STREE	TADDRESS)		
		·	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE)	<u></u>		
B. If amending the registered agent and/ registered agent and/or the new registered of  Name of New Registered Agent:		dress on our records, enter the name of the ne	
New Registered Office Address: 214 East Lucerne Circle			
		Enter Florida street address	
	Orlando Cio	, Florida 32801	
New Registered Agent's Signature, if changing F	•	Lip Gaak	
I hereby accept the appointment as registere provisions of all statutes relative to the prop	d agent and agree to act er and complete perform stered agent as provided registered office address,	t in this capacity. I further agree to comply with the nance of my duties, and I am familiar with and if for in Chapter 605, F.S. Of, if this document is the first occurrence is the second of the se	

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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:

<u> Citle</u>	Name	Address	Type of Actio
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			□ Remove
			bbA
			☐ Remove
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			□ Add
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Ifame	nding an	y other informati	on, enter change(s) here: (Attach additional s	sheets, if necessary.)
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			da Department of State)	· · · · · · · · · · · · · · · · · · ·
Dated_	May	5	, 2015	
		$\sim$	Tande Co	
		S	gnature of a member of authorized representative of a r	nember

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Filing Fee: \$25.00



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