

L16000 003 685

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

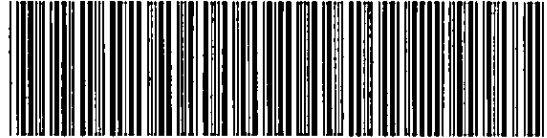
(Business Entity Name)

(Document Number)

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19 OCT -9 PM 12:47  
OFFICE OF CORPORATIONS

*Amend*

10/1/2019

D CUSHING

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** CLAUDIA'S MOBILE HOMES & REAL ESTATE, 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:

PETR KORINEK

Name of Person

CLAUDIA'S MOBILE HOMES & REAL ESTATE, LLC

Firm/Company

10353 ORANGE DR

Address

DAVIE, FL 33328

City/State and Zip Code

PETR.KORINEK@CLAUDIASMHL.COM

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

For further information concerning this matter, please call:

PETR KORINEK

941 462-4625

at ( )

Name of Person

Area Code

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

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DIVISION OF CORPORATIONS  
19 OCT -9 PM 12:47

## **Claudia's Mobile Homes & Real Estate LLC**

October 7, 2019

To whom it may concern:

Effective October 31, 2019 James L Hoey Jr, the licensed qualifying broker of Claudia's Mobile Homes & Real Estate LLC will resign (retire) from the company.

This action will result in James Hoey's position as a Director of the company being dissolved.

A handwritten signature in black ink, appearing to read "James L Hoey Jr", with a stylized flourish at the end.

James L Hoey Jr

[jim@jimhoey.com](mailto:jim@jimhoey.com)

941-323-5184 mobile

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

Claudia's Mobile Homes & Real Estate, 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 01/06/2016 and assigned  
Florida document number L16000003685.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

10353 Orange Dr

Davie, FL 33328

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

10353 Orange Dr

Davie, 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

Florida

City

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**

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
D	HOEY, JAMES	5205 16TH AVENUE E	<input type="checkbox"/> Add
		PALMETTO, FL 34221	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
P	KORINEK, PETR	10353 Orange Dr	<input type="checkbox"/> Add
		Davie, FL 33328	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

[illegible]

**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 October 7th 2019

Print

Signature of a member or authorized representative of a member

PETR KORINEK

Typed or printed name of signee