# 11600042173

(Requ	estor's Name	)		
(Addre	ess)	-		
(Addre	ess)			
(City/S	State/Zip/Phor	ne #)		
PICK-UP	☐ WAIT	MAIL		
(Busin	ness Entity Na	ime)		
(Document Number)				
Certified Copies	Certificate	es of Status		
Special Instructions to Fil	ing Officer:			
		•		

Office Use Only



400298056584

05/03/17--01018--019 \*\*30.00

2017 MAY +3 PH |: 35 SECRETARY OF STATE FALLAHASSEF, FI OPID A

K. SALY MAY -5 2017

# COVER LETTER

Division of Corporations
SUBJECT: HANNAY Construction Services, UC 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:
Name of Person  HANNAY Construction Services, LLC  Firm/Company
Firm/Company  1871 Dora Ct  Address
De Hova, FL 32725  City/State and Zip Code  1 A A WAY 1 e 9 mail. Com  E-mail address: (to be used for fugure annual report notification)
For further information concerning this matter, please call:
Teresa Haway at (386) 218-5366  Name of Person  Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee  \$\fomegat{1}{\text{\$\sqrt{1}}}\$\$30.00 Filing Fee & Certificate of Status  \$\fomegat{1}{\text{\$\cute{1}}}\$\$ Certified Copy (additional copy is enclosed)  \$\fomegat{1}{\text{\$\cute{1}}}\$\$ \$\fomegat{2}{\text{\$\cute{1}}}\$\$ \$\fomegat{2}{\$\cu

### MAILING ADDRESS:

TQ:

**Registration Section** 

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**

2017MAY = 3 PM 1:35

ed 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 Florida document number 4/4 0000 42/73 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 "L.L.C." Enter new principal offices address, if applicable: (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, 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

### 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

Florida

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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	TENESA LHANNAY	1871 Dora Ct	
		Deltona, FL 32725	⊠.Remove
			□ Change
	70-70-0		Add
			□ Remove
			□ Change
<del></del>		<u> </u>	□ Add
		- L Anti-	SE Bemove F
	<del></del>	÷	FOF SPANIS
			F□ Remove □□ Change
			Remove
			Change
			Add
			□ Remove
			☐ Change

	•			<u> </u>	
<del> </del>					G 32
					CCU THE S
					2500
					-40
					<b>*</b>
	-				
		· · ·	<del></del>		
<del>va.</del>		<u> </u>			
•		<del></del>		<del></del>	
effective date is listed, If the date inserte	r than the date of fil the date must be specific ed in this block does no te on the Department of	and cannot be prior to ot meet the applical	a date of filing or more than ole statutory filing requi	(optional) n 90 days after filing.) Purements, this date will	irsuant to 605.
ecord specifies a e 90th day afte	a delayed effective or the record is file	e date, but not ed.	an effective time,	at 12:01 a.m. on	the earlie
d May	Vatt.	, 2017 //	ized representative of a me	2	

Page 3 of 3

Filing Fee: \$25.00