

L/6000057392

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

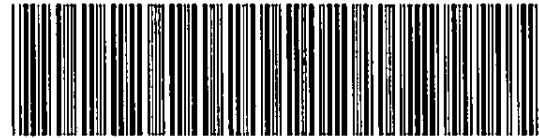
(Business Entity Name)

(Document Number)

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12

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** 3rd Day Hay 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:

Mike Jansen Van Doorn

\_\_\_\_\_  
Name of Person

3rd Day Hay LLC

\_\_\_\_\_  
Firm/Company

13450 N US Hwy 301

\_\_\_\_\_  
Address

Citra, Florida 32113

\_\_\_\_\_  
City/State and Zip Code

mike.j@3rddayhay.com

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

For further information concerning this matter, please call:

Mike Jansen Van Doorn

352

501-8328

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



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>
MGR	Michael Jansen Van Doorn	321 Pine Rd	<input checked="" type="checkbox"/> Add
		Cordele, GA 31015	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	John Frohms	9090 20th Side Rd	<input checked="" type="checkbox"/> Add
		Alliston, ON L9R 1V1	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Joshua Yoder	321 Pine Rd	<input checked="" type="checkbox"/> Add
		Cordele, GA 31015	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Mike Scace	13450 N US Hwy 301	<input checked="" type="checkbox"/> Add
		Citra, FL 32113	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Mary Wibe	13450 N US Hwy 301	<input checked="" type="checkbox"/> Add
		Citra, FL 32113	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Ownership percentages for each member of the company are as follows:

Michael Jansen Van Doorn - 52%

Mary Wibe - 12%

John Frohms - 12%

Joshua Yoder - 12%

Mike Scace - 12%

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FALLADA COUNTY, MISSISSIPPI

**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 Dec 2nd

2017

Signature of a member or authorized representative of a member

Michael Jansen Van Doorn  
Typed or printed name of signer