## 116000074184

(Req	uestor's Name)	
(Ädda	ress)	-
(Add	ress)	
(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



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**S Warren** DEC 0 5 2016



November 22, 2016

RYAN M. HINTON 143 HURST RD NE PALM BAY, FL 32907

SUBJECT: 1HUT CONSTRUCTION, LLC

Ref. Number: L16000074184

We have received your document for 1HUT CONSTRUCTION, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION - INC, but your entity is a LIMITED LIABILITY COMPANY - LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 316A00025100

Stacey M Warren Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

Div	ision of Corpo	rations					
SUBJECT:	1HUT Constru	action, LLC					
SOBSECT.		Name of Limit	ted Liability Company				
The enclosed	l Articles of An	nendment and fee(s) are subm	nitted for filing.				
Please return	all correspond	ence concerning this matter t	o the following:				
		Ryan M. Hinton					
	Name of Person						
		1HUT Construction, LLC					
Firm/Company							
		143 Hurst Rd. NE					
			Address				
		Palm Bay, FL 32907					
			City/State and Zip Code				
		rynohinton@gmail.com					
		E-mail address: (t	o be used for future annual report notific	cation)			
For further in	nformation con	cerning this matter, please ca	II:				
Ryan M. Hii	nton		321 750-8548 at ()				
	Name of P	erson	Area Code Daytime	Telephone Number			
Enclosed is a	a check for the	following amount: You	have \$35. Check	s previously mailed			
■ \$25.00 F	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:

TO:

**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

1HUT Construction, LLC					
(Name of the Lim	ited Liability Co (A Florida Limi	mpany as it now appears of ted Liability Company)	n our records.)	****	
he Articles of Organization for this Limited 1	Liability Comp	any were filed on April	14, 2016	an	d assigned
lorida document number L16000074184	·				
his amendment is submitted to amend the fol	lowing:				
. If amending name, enter the new name	of the limited l	iability company here	<b>:</b> .		
I/A					
ne new name must be distinguishable and contain the	words "Limited L	iability Company," the desi	gnation "LLC" or the	abbreviation	n "L.L.C."
nter new principal offices address, if appli	cable:	N/A			
Principal office address MUST BE A STRE	ET ADDRESS	Σ		<b>.</b>	
			**************************************	ġ =	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	<del></del>	F 55	
		<u></u>	(n)2	< N	
				<u>סר וּ</u>	[ [ ]
			OR A	<i>\thi</i>	Ų
. If amending the registered agent and egistered agent and/or the new registered of				er the na	me of the
gistered agent and/or the new registered (	nice aduless	<u>nere</u> .	* .		
Name of New Registered Agent:	N/A			·	
New Registered Office Address:	N/A				
	<u> </u>	Enter Florida	street address		
			, Florida		
		Citv		Zip C	 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>	Address	Type of Action
AMBR	Ricardo Gamez	2124 Allan Adale Rd.	<b>≅</b> Add
		Melbourne, FL 32935	Remove
			□ Change
AMBR	Wyant Benjamin	2115 Wagonwheel Ave.	■ Add
		Palm Bay, FL 32909	□ Remove
			Change
			Add
			□ Remove
			Change
			Add
			Remove
			☐ Change
			Add
			Remove
			Change  Change  ARETARY  Add  Add
			TO TRANSPORT
			ORIDA Change

N/A			
, ,			
			<del></del> -
			<del></del>
fective date, if other than the	date of filing:  be specific and cannot be prior to date of filing or m	(optional)	
pte: If the date inserted in this blooment's effective date on the Do	ock does not meet the applicable statutory filing partment of State's records.	g requirements, this date wi	ll not be listed
record specifies a delayed The 90th day after the reco	effective date, but not an effective to ord is filed.	ime, at 12:01 a.m. or	the earlier
November 29	, 2016		
RAD	Signature of a member or authorized representative	AF manufacture 12 H	
Ryan M. Hinton	oignature of a member of authorized representative	NS.	
	Typed or printed name of signee		
	Page 3 of 3	بسلالات	;; o

Filing Fee: \$25.00

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