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(Re	questor's Name)	
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(Do	cument Number)	
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### **COVER LETTER**

Division of Corporations	
SUBJECT: Hartenstein Development and Land Name of Limited Liability Company	Use,
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Tease retain an correspondence concerning this marker to the ronowing.	
Bret Jones do Kay Walls	
Bret Jones, PA	
700 Almond Street	
Clermont, FL 34711  biones @ pretiones pa. com	
E-mail address: (to be used for future armual report notification)	
For further information concerning this matter, please call:	
Kay Walls at 352 394-4025 X Name of Person Area Code Daytime Telephone Number	-246
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\times \text{\$30.00 Filing Fee & Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$\times \text{\$60.00 Filing Fee, Certified Copy (additional copy is enclosed)}\$\$\$ 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 ARTICLES OF ORGANIZATION

Land Use, LLC

The Articles of Organization for this Limited Liability Company	were filed on Marc	h 20, 2017 and assigned	
The Articles of Organization for this Limited Liability Company Florida document number <u>L170006346</u>	6	7	Miretan Miretan Miretan
This amendment is submitted to amend the following:		3 &	
A. If amending name, enter the new name of the limited liabi	lity company here:		il.
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designatio	n "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 offregistered agent and/or the new registered office address here  Name of New Registered Agent:		0X 625 2nasoffkee, 33538 ecords, enter the name of the	FL new
New Registered Office Address:	Enter Florida street	addraes	_
	Emer 1 lorad street		
	City	, Florida Zip Code	_
New Registered Agent's Signature, if changing Registered Agent:	,	•	
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p	performance of my duti	ies, and I am familiar with and	

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 = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Richard Ross	P.O. BOX 625	Add
	Hartenstein, Jr.	P.O. Box 625 Lake Panasoffkee	Remove
		33538	Change
			□ Add
			Remove
			□ Change
			Add
			Remove
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Page 3 of 3

Filing Fee: \$25.00