

L17000/20030

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

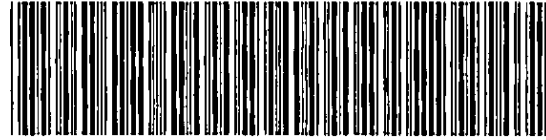
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CLERK OF COURT
TALLAHASSEE, FLORIDA

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D BRUCE
AUG 14 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hurricane Fencing Company LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kenneth L. Huffstutler

Name of Person

Hurricane Fencing Company LLC

Firm/Company

2218 Westfall Drive

Address

Orlando, FL 32817

City/State and Zip Code

hurricanefence@outlook.com

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

For further information concerning this matter, please call:

Leslie Crawford

407

402-2197

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

TALLAHASSEE, FL

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

Hurricane Fencing Company 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 June 01, 2017 and assigned
Florida document number L17000120030.

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:

2218 Westfall Drive

(Principal office address MUST BE A STREET ADDRESS)

Orlando, FL 32817

Enter new mailing address, if applicable:

2218 Westfall Drive

(Mailing address MAY BE A POST OFFICE BOX)

Orlando, FL 32817

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:

2218 Westfall Drive

Enter Florida street address

Orlando

City

Florida

32817

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

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CLERK OF CIRCUIT COURT
JUDICIAL CIRCUIT IN AND FOR
THE COUNTY OF ORANGE, FLORIDA

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

IGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
IGR	Kenneth L. Huffstutler	2218 Westfall Drive	<input checked="" type="checkbox"/> Add
		Orlando, FL 32817	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
IGR	Leslie V Crawford	1679 Lakelet Loop	<input checked="" type="checkbox"/> Add
		Oviedo, FL 32765	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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9. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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:

a) The 90th day after the record is filed.

Dated August 04, 2017



Signature of a member or authorized representative of a member

Kenneth L. HuffStutler, III

Typed or printed name of signee

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Filing Fee: \$25.00

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CLERK OF SUPREME COURT
STATE OF MISSISSIPPI

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