

L17000203325

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

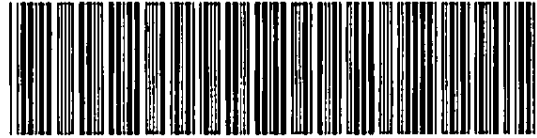
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL



CHEFFER HAGAN

ATTORNEYS AT LAW

M. Brian Cheffer
Samuel J. Hagan, IV

2120 McGregor Blvd.
Fort Myers, FL 33901
Telephone: 239-334-1381
Facsimile: 239-334-0266

November 17, 2022

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: Hook Contactors of Florida, LLC

Dear Sir or Madam:

Enclosed please find an original Articles of Amendment and a check in the amount of \$55.00 to cover the filing fees for the same regarding the above referenced matter. After filing, please return the Certified Copy to the attention of the undersigned in the enclosed envelope. Thank you.

Please call 239-334-1381 ext 335 if you have any questions and/or comments.

Very truly yours,

Samuel J. Hagan, IV
(electronically signed to expedite)

Samuel H. Hagan, IV
For the Firm

SJH:lkg

Enclosure

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: HOOK CONTRACTORS OF FLORIDA, 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:

Hunter C. Leake, IV

Name of Person

Hook Contractors of Florida, LLC

Firm/Company

540 Keenan Ave.

Address

Fort Myers, FL 33919

City/State and Zip Code

hunter@cougarcompanies.com

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

For further information concerning this matter, please call:

Hunter C. Leake, IV

Name of Person

239

at ()

Area Code

340-3374

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

FILED
2022 NOV 21 AM 9:24
TALLAHASSEE, FL
CLERK OF COURT

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

HOOK CONTRACTORS OF FLORIDA, 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 10/02/2017 and assigned
Florida document number 117000203325.

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

_____, Florida _____

City

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

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Keith E. Dean	304 NE 7th St.	<input type="checkbox"/> Add
		Cape Coral, FL 33909	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

2022 NOV 21 AM 9:23
SECRET
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 01/24/2024 BY 60322
UCBAW

SECRET
2025 NOV 21 AM 9:23
ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

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 November 18 / / 2022

x

November 18 2001

x *[Signature]*

Signature of a member

Signature of a member or authorized representative of a member

Hunter C. Leake, IV

Typed or printed name of signee

Filing Fee: \$25.00