

48000287098

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

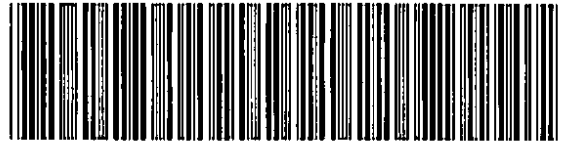
(Business Entity Name)

(Document Number)

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RECEIVED  
JAN 14 2019  
CLERK OF SUPERIOR COURT  
JAN 14 2019

Amend

JAN 14 2019

D CUSHING

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SCHWAB BROTHERS HYDRAULICS 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:

JENNIFER L. SCHWAB

Name of Person

SCHWAB BROTHERS HYDRAULICS LLC

Firm/Company

2365 N US 19

Address

PERRY, FL 32347

City/State and Zip Code

jennifer@marigontinc.com

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

For further information concerning this matter, please call:

RICHARD W. SCHWAB

850

838-6178

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

1000

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

This amendment is submitted to amend the following:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**(Mailing address MAY BE A POST OFFICE BOX)**

\_\_\_\_\_, Florida \_\_\_\_\_  
City Zip Code

## Page 1 of 3

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	RICHARD W. SCHWAB	200 CHERYL DR.	<input checked="" type="checkbox"/> Add
		PERRY, FL 32347	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	CHAD W. SCHWAB	103 ELIZABETH LN	<input type="checkbox"/> Add
		PERRY, FL 32347	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMGR	JENNIFER L. SCHWAB	200 CHERYL DR.	<input type="checkbox"/> Add
		PERRY, FL 32347	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

(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)

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.

Frank W. Stuebel  
Signature of a member or authorized representative of a member

Typed or printed name of signee