LZD 000104310

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(0.7), 0.2.0 2.1
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Costamon Names)
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COVER LETTER

TO: Registration Section Division of Corporations	بالمري المراجعة
•	ساورين
11 - 1 - 2 - 5 - 5	⇔ *
SUBJECT: HENSON KEAL ESTA	TE LLC
SUBJECT: HENSON REAL ESTA Name of Limit	ed Liability Company
The enclosed Articles of Amendment and fee(s) are subn	nitted for filing.
61	
Please return all correspondence concerning this matter to	o the following:
C. 1/-	
LAY HE	Name of Person
,	Name of Person
11-11	- ton-110
	Firm/Company
	rim/Company
(72 4)	- /)
670 N. Ri	ER RD.
	Address
1/ -	2 ()
VENICE h	34243 City/State and Zip Code
	,
Chenson @ henso	n Contractors. Com be used for future annual report notification)
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter, please cal	1.
For further information concerning this matter, piease car	ı.
$\alpha = 1/2$	air an isun
CLAY HENSON	at (<u>941</u>) <u>232-6859</u> Area Code Daytime Telephone Number
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
S25.00 Filing Fee □ \$30.00 Filing Fee &	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee,
Certificate of Status	Certified Copy Certificate of Status &
	(additional copy is enclosed) Certified Copy (additional copy is enclosed)
	(additional copy is effctosed)
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HENIXAN REAL FOR	2628 A 17 Fil 3: 26					
(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 $\frac{4/16/20}{}$ and assigned					
Florida document number <u>L2000104310</u>						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liabi	lity company here:					
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbreviation "L.L.C."					
Enter new principal offices address, if applicable:	115 CORPORATION WAY					
(Principal office address MUST BE A STREET ADDRESS)	115 CORPORATION WAY SUITE 'A' VENILE, FL 34285					
	VENILE, FL 34285					
Enter new mailing address, if applicable:						
(Mailing address MAY BE A POST OFFICE BOX)						
B. If amending the registered agent and/or registered office a	ddress 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					
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 paccept the obligations of my position as registered agent as packed being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and rovided for in Chapter 605, F.S. Or, if this document is					

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

2020 AUG 17 PH 3: 26

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR_	HEATHER B. HENSON	670 N. RIVER RD., VENICE F. 34293	<u>}</u> □Add
			XRemove
			□ Change
MGR	CLAYTON E. HENSON	670 N. RIVER PS, VENICE FL 34293	<u>></u> ⊠Add
			□Remove
			□Change
			□Add
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ffaatius.	date, if other than the date of filing: (optional)
an effectiv	re 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
lote: If th	he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
ocument'	s effective date on the Department of State's records.
	16 1 1 6 1 6 1 1 1 1 1 1 1 1 1 1 1 1 1
recora sp I is filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
is med.	
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ated	HUGUST S . 2020.
	August S. 2020. — Halles Henson
	Thather Hunton)
	Signature of a member or authorized representative of a member
	HEATHER B. HENSON Typed or printed name of signee
	TUNITULE U. HENDON

Filing Fee: \$25.00