

120000309147

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

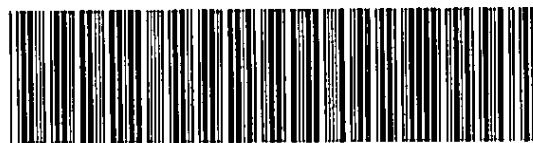
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2022 JAN -6 AM 11:47  
SECRETARY OF STATE  
TALLAHASSEE, FL

D BRUCE  
JAN 0 2022



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 11, 2021

BRUCE B HUMPHREY  
BIRCHFIELD & HUMPHREY  
320 TOWN CENTER AVE, #120  
PONTE VEDRA, FL 32081

SUBJECT: H & H LAKESIDE, LLC  
Ref. Number: L20000309147

We have received your document for H & H LAKESIDE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6842.

Deborah Bruce  
Corporate Records Supervisor II

Letter Number: 721A00029883

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STATE

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: H & H Lakeside, 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:

Bruce B. Humphrey

\_\_\_\_\_  
Name of Person

Birchfield & Humphrey

\_\_\_\_\_  
Firm/Company

320 Town Center Avenue, #120

\_\_\_\_\_  
Address

Ponte Vedra, FL 32081

\_\_\_\_\_  
City/State and Zip Code

bhumphrey@birchfieldhumphrey.com

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

For further information concerning this matter, please call:

Bruce B. Humphrey

904 396-6625  
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 Address:**

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

SECRET  
TALLAHASSEE, FL

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BIRCHFIELD  
&  
HUMPHREY

EMINENT DOMAIN & PROPERTY RIGHTS LAW FIRM

Bruce B. Humphrey  
bhumphrey@birchfieldhumphrey.com

Lauren E. Howell  
lhowell@birchfieldhumphrey.com

W.O. Birchfield

1935-2016

January 5, 2022

Deborah Bruce  
Corporate Records Supervisor II  
Division of Corporations  
Florida Department of State  
P.O. Box 6327  
Tallahassee, Florida. 32314

Re: H & H Lakeside, LLC Name Change  
Ref. Number: L20000309147  
Letter Number: 721A00029883

FILED  
2022 JAN -6 AM 11:47  
SECRETARY OF STATE  
TALLAHASSEE, FL

Dear Mrs. Bruce:

As requested in your letter dated December 11, 2021 please note that the principals of Birchfield and Humphrey, P.A. and H & H Lakeside, LLC are the same, consisting of myself and Lauren E. Howell. Enclosed are the following documents setting forth the current ownership of these two entities:

1. Articles for Birchfield & Humphrey, P.A.
2. Shareholders Agreement for Birchfield & Humphrey, P.A. showing ownership allocation of 50% to W.O. Birchfield and 50% to Bruce B. Humphrey.
3. Unanimous Written Consent transferring shares of W.O. Birchfield to Bruce B. Humphrey after the death of W.O. Birchfield resulting in 100% of the firm being owned by Bruce B. Humphrey.
4. Unanimous Written Consent transferring 10% of shares to Lauren E. Howell.
5. Articles for H & H Lakeside, LLC
6. Operating Agreement for H & H Lakeside, LLC showing 100% of ownership being held by Bruce B. Humphrey and Lauren E. Howell.

Let me know if there is any additional information you need to process our name change request.

Very truly yours,

Bruce B. Humphrey

BBH/hau

320 Town Plaza Avenue, #120 | Ponte Vedra, FL 32081

Tel: (904) 396-6625 | Fax: (904) 396-6624

www.birchfieldhumphrey.com

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

H & H Lakeside, 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 September 30, 2020 and assigned Florida document number L20000309147.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Birchfield & Humphrey, LLC

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)**

320 Town Plaza Avenue, #120

Ponte Vedra, FL 32081

**Enter new mailing address, if applicable:**

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

320 Town Plaza Avenue, #120

Ponte Vedra, FL 32081

**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**

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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
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TALLAHASSEE, FL

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STATE  
TALLAHASSEE, FL

2022 JAN -6 AM 11:48  
STATION: TALLAHASSEE, FL

五

**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.

Dated November 23, 2021

2021  
B-B. A L  
Signature of a member or authorized representative of

Signature of a member or authorized representative of a member

Bruce B. Humphrey

Typed or printed name of signee