

L99000003309

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

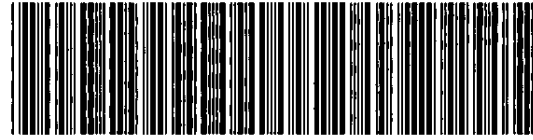
(Business Entity Name)

(Document Number)

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

2010 SEP 15 PM 12:16

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J. SAULSBERRY  
EXAMINER

SEP 16 2010

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Hogan's Creek Station, 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:

Alfred T. Surratt

Name of Person

Hogan's Creek Station, LLC

Firm/Company

1014 Elder Lane

Address

Jacksonville, Fl. 32207

City/State and Zip Code

travissurratt@msn.com

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

For further information concerning this matter, please call:

Alfred T. Surratt

Name of Person

at ( 904 )

608-7256

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

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Hogan's Creek Station, LLC

Page 1 of 2

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Nancy A. Surratt	1014 Elder Lane Jacksonville, FL 32207	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

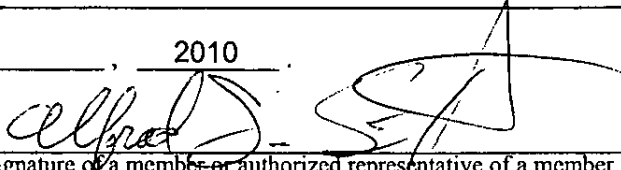
N/A

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FILED

Dated September 13, 2010

  
Signature of a member or authorized representative of a member

Alfred T. Surratt

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00