

L99000008824

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

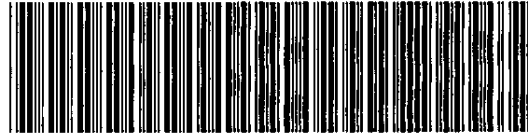
Special Instructions to Filing Officer:

**A. LUNT**

JUL - 8 2011

**EXAMINER**

Office Use Only



400209685214

07/07/11--01010--017 \*\*30.00

**FILED**  
2011 JUL -7 AM 11:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

GLORIA J. KELSEY  
8225 SHADOW PINE WAY  
SARASOTA, FL 34238  
941-921-3857

July 5, 2011

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

FILED  
2011 JUL -7 AM 11:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RE: L99000008824

Dear Sir or Madam:

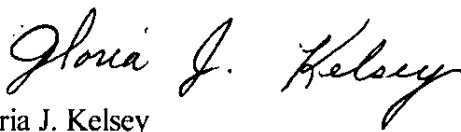
Hopewell Enterprises LLC (L99000008824) was deemed inactive on 9/15/2006.

To correct this the following are enclosed:

- Cover letter for "Articles of Amendment to Articles of Organization" form changing the name of Hopewell Enterprises LLC to Hopewell Activities LLC. A check in the amount of \$30.00 covering the filing fee and a Certificate of Status is attached.
- Cover letter for "Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company" form. A check in the amount of \$25.00 covering the filing fee is attached.
- A "Limited Liability Company Reinstatement" form. A check in the amount of \$938.50 covering the filing fee and a Certificate of Status is attached.

I believe this is all that is needed to reinstate the LLC, to change the name and to change the registered agent.

Sincerely,

  
Gloria J. Kelsey

2011 JUL 11 10:21  
RECEIVED  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: Hopewell Activities 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:

Gloria J. Kelsey

Name of Person

Firm/Company

8225 Shadow Pine Way

Address

Sarasota, FL 34238

City/State and Zip Code

glohope1@verizon.net

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

Gloria J. Kelsey

Name of Person

at ( 941 )

921-3857

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

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

Hopewell Enterprises 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 12/15/1999 and assigned  
Florida document number L99000008824

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

This amendment is submitted to amend the following:

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

Hopewell Activities LLC

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

**Enter new principal offices address, if applicable:**

8825 Shadow Pine Way

**(Principal office address MUST BE A STREET ADDRESS)**

Sarasota, FL 34238

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

8825 Shadow Pine Way

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

Sarasota, FL 34238

**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:**

Gloria J. Kelsey

**New Registered Office Address:**

8825 Shadow Pine Way

*Enter Florida street address*

Sarasota

Florida

34238

*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 608, 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 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

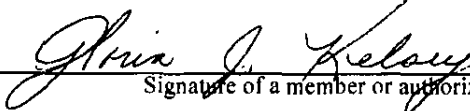
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Joseph E. Hopewell	2905 Satsuma Dr. Sarasota, FL 34239	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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TALLAHASSEE, FLORIDA

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated July 5, 2011



Signature of a member or authorized representative of a member

Gloria J. Kelsey

Typed or printed name of signee