

MO8000004426

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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JAN - 8 - 10

EXAMINER

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 JAN - 7 AM 11:02

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Howard Ecker & Company, Florida, 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:

Ralph Spencer Stoetzel

Name of Person

Firm/Company

1447 Stone Road

Address

Tallahassee, FL 32303

City/State and Zip Code

ralphstoetzel@hotmail.com

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

For further information concerning this matter, please call:

Ralph Spencer Stoetzel

Name of Person

at (850) 386-9266

Area Code & Daytime Telephone Number

cell (850) 508-1497

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

2010 JAN -7 AM 11:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Howard Ecker + Company, Florida, 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 9/30/2008 and assigned
Florida document number M08000004426

This amendment is submitted to amend the following:

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

N/A - Remaining the Same

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

N/A - Remaining the Same

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A - Remaining the Same

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:

Ralph Spencer Stoetzel

New Registered Office Address:

1447 Stone Road

Enter Florida street address

Tallahassee

Florida

32303

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.

R. Stoetzel
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

Title	Name	Address	Type of Action
MGR	Ralph Spencer Stuetzel	1447 Stone Road Tallahassee, FL 32303	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Robert A. Spottswood	506 Fleming Street Key West, FL 33040	<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

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

Dated

January 5

2009

Signature of a member or authorized representative of a member

Howard Ecker, Manager

Typed or printed name of signer

2010 JAN -7 AM 11:02
CLERK OF STATE
TALLAHASSEE, FLORIDA