

L190000 92060

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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S TALLENT

MAY 14 2019

FILED  
2019 MAY -9 AM 11:17  
SECRETARY OF STATE  
TALLAHASSEE, FL

*Amard*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 29, 2019

DIANA RAKINE-HTEIT  
18032 SW 41ST ST  
MIRAMAR, FL 33029

SUBJECT: 2ND M&M INVESTMENTS LLC  
Ref. Number: L19000092060

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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) 245-6050.

Susan Tallent  
Regulatory Specialist II

Letter Number: 419A00008552

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 2<sup>nd</sup> M&M Investments 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:

Diana Rakine-Hest  
Name of Person

**RECEIVED** 2<sup>nd</sup> M&M Investments LLC  
Firm/Company  
MAY 09 2019

18032 SW 41<sup>st</sup> ST  
Address

Miramar, FL 33029  
City/State and Zip Code

Pondi.Intl@gmail.com ✓  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Diana Rakine-Hest at ( 954 ) 649 8437  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

2<sup>nd</sup> M8M Investments 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 4/3/19 and assigned Florida document number L19000092060.

This amendment is submitted to amend the following:

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

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)

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

(Mailing address MAY BE A POST OFFICE BOX)

**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:

Diana Rakine-Heit

New Registered Office Address:

18032 SW 41<sup>st</sup> ST

*Enter Florida street address*

Miramar

*City*

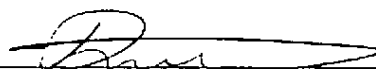
Florida

33029

*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**

FILED  
2019 MAY -9 AM 11:17  
SECRETARY OF STATE  
TALLAHASSEE, FL

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>
MGR	1 <sup>st</sup> M&M Investments LLC	18032 SW 41 <sup>st</sup> ST	<input type="checkbox"/> Add
		Miramar, FL 33029	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Diana Rakine-Hteit	18032 SW 41 <sup>st</sup> ST	<input checked="" type="checkbox"/> Add
		Miramar, FL 33029	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Mohammad Hteit	18032 SW 41 <sup>st</sup> ST	<input checked="" type="checkbox"/> Add
		Miramar, FL 33029	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If an effective 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 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Signature of a member or authorized representative of a member

Diana Rakine-Hteil  
Typed or printed name of signee