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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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P. HUNT 08/01/23



COVER LETTER

TO: Registration Section **Division of Corporations**

SUBJECT:		Ludena LLC		
	Name of Lim	ited Liability Company		
	Amendment and fee(s) are sub	_		
Please return all correspo	ondence concerning this matter	to the following:		
		Fredy Ludena Granda		
	Name of Person			
		Ludena LLC		
		Firm/Company		~ ₃ <u>©</u>
2114 Nelson Road North				2023 SEP -
		Address		EP - 38 CF
		Cape Coral, FL 33993		
		City/State and Zip Code fred@hardstoor.com		
	E-mail address: (to be used for future annual report noti	fication)	- 10
For further information c	oncerning this matter, please c	all:		
Fredy Ludena Granda at ()			_	
Name of Person		Area Code Daytim	e Telephone Number	
Enclosed is a check for the	he 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 F Certificate of S Certified Copy (additional copy is	Status &
Martin and Addison		Street Address		

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Ludena L				
(Name of the Limited Liability Company (A Florida Limited Liab	as it now appear pility Company)	rs on our records.)		
The Articles of Organization for this Limited Liability Company we	ere filed on	October 20, 2021	and assigned	
Florida document number				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabilit	y company he	ere:		
Hardstoor LLC				
The new name must be distinguishable and contain the words "Limited Liability	Company," the d	esignation "LLC" or the abb	reviation "L.L.C."	
Enter new principal offices address, if applicable:	2114 Ne	Ison Road North, Cape Co	oral, FL 33993	
(Principal office address MUST BE A STREET ADDRESS)				
Enter new mailing address, if applicable:	2114 Nelson Road North, Cape Coral, FL 33993			
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered office add agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:		ecords, enter the name	of the new residence of the ne	stered
		. Florida	. t 0	
- , , 	City	, 1 (01104	Zin 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 amending Authorited 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>	Address	Type of Action
MGR/AMBR	Fredy Ludena Granda	2114 Nelson Road North, Cape Coral, FL 33993	□Add
			□Remove
			≅ Change
AMBR	Fredy Ludena Aliaga	244 SW 31st Ter, Cape Coral, FL 33914	□Add
			□Remove
			■ Change
			□Add
			□Remove
			□Change
			DIVISION OF C
			□Remove 📆
			Chapter Service
			□ Add
			□Remove
			□Change
			□ Remove
			Change

TOTAL TO MOREOUS

Typed or printed name of signee