

L06000014660

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(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

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Y SULKER

# JOHN O. KOCHKERIAN, ESQ., CPA

10231 Lake Vista Court • Parkland, FL 33076 • (954) 818-9795 • [kochkerian@gmail.com](mailto:kochkerian@gmail.com)

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February 8, 2016

Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Re: HS Sevan Investments, LLC  
Document Number: L06000014660  
Tracking Number: CR4977867057

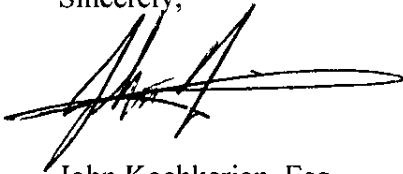
Dear Sir or Madam:

As requested to reinstate this company, enclosed please find the following for filing:

1. Articles of Amendment;
2. Limited Liability Company Reinstatement;
3. A check in the amount of \$1,210 made payable to Florida Department of State.

Please process the documents as soon as possible. Should you have any questions, please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink, appearing to be 'John Kochkerian', with a long horizontal flourish extending to the right.

John Kochkerian, Esq.

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** SEVAN 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:

JOHN KOCHKERIAN, ESQ.

Name of Person

JOHN KOCHKERIAN, ESQ.

Firm/Company

10231 LAKE VISTA COURT

Address

PARKLAND, FL 33076

City/State and Zip Code

KOCHKERIAN@GMAIL.COM

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

For further information concerning this matter, please call:

JOHN KOCHKERIAN

954 818-9795  
at ( )

Name of Person

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**

SEVAN 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 02/06/2006 and assigned  
Florida document number L06000014660.

This amendment is submitted to amend the following:

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

HS SEVAN INVESTMENTS, LLC

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)**

6159 NW 32ND AVENUE

BOCA RATON, FL 33496

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

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

6159 NW 32ND AVENUE

BOCA RATON, FL 33496

**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:

JOHN KOCHKERIAN, ESQ.

New Registered Office Address:

10231 LAKE VISTA COURT

Enter Florida street address

PARKLAND

City

, Florida 33076

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**

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	HAIK SAMRA	570 SE 14TH ST	<input type="checkbox"/> Add
		POMPANO BEACH, FL 33060	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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16 FEB 16 PM 3:22  
 ALL INFORMATION CONTAINED  
 HEREIN IS UNCLASSIFIED  
 DATE 02-16-2016 BY 60322

16 FEB 6 PM 3:30  
COLVIA SEE FILE

16 FEB 6 PM 3:22

FEBRUARY 8, 2016

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated FEBRUARY 8, 2016

Signature of a member or authorized representative of a member organization

JOHN KOCHKERIAN

Typed or printed name of signee