

206 0000 98251

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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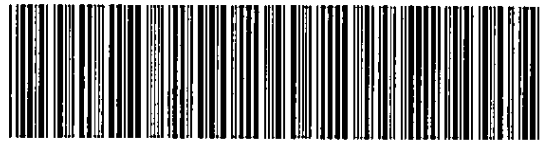
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE FL

D BRUCE
OCT 08 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Highlands Investment Group, 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:

Aisha Moodie- Myrie
Name of Person

Highlands Investment Group, LLC
Firm/Company

2645 Executive Park Drive # 674
Address

Weston, FL. 33331
City/State and Zip Code

aisha@highlandsinvestment.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Aisha Moodie- Myrie at (954) 828-2208
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

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

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

SECRET
TALLAHASSEE, FL

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

Highlands Investment Group, 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 10/09/2006 and assigned
Florida document number L06000098251.

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)

2645 Executive Park Drive

674

Weston, FL 33331

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2645 Executive Park Drive

674

Weston, FL 33331

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:

New Registered Office Address:

2645 Executive Park Drive # 674

Enter Florida street address

Weston

City

Florida

33331

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 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>
MGRM	Aisha Moodie- Myrie	2645 Executive Park Drive	<input type="checkbox"/> Add
		# 674	<input type="checkbox"/> Remove
		Weston, FL 33331	<input checked="" type="checkbox"/> Change (Update to this new address)
MGRM	Douglas Moodie	2645 Executive Park Drive	<input type="checkbox"/> Add
		# 674	<input type="checkbox"/> Remove
		Weston, FL 33331	<input checked="" type="checkbox"/> Change (Update to this new address)
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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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.

Dated September 30th 2021

Signature of a member or authorized agent

Signature of a member or authorized representative of a member

Asha Moodie - Myrie

Typed or printed name of signee

Filing Fee: \$25.00