

LO7000004053

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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FILED
2019 SEP 26 PM 3:21
TALLAHASSEE, FL
SECRETARY OF STATE

SEP 27 2019

CLERK



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 13, 2019

DAVID W HIATT
2402 W MORRISON AVE #6
TAMPA, FL 33629

SUBJECT: HIATT ARCHITECTURE + INTERIORS, LLC
Ref. Number: L07000004053

We have received your document for HIATT ARCHITECTURE + INTERIORS, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a PROFIT COROPORATION, but your entity is a . Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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.

Catherine M Wood
Regulatory Specialist II

Letter Number: 819A00018993

REC-11
SEP 26 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hiatt Architecture + Interiors, 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:

Jacqueline Hiatt
Name of Person

Hiatt Architecture + Interiors, LLC
Firm/Company

2402 W Morrison Ave #6
Address

Tampa, Florida 33629
City/State and Zip Code

Jacquelinehiatt-architecture.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Hiatt at (813) 495 6650
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount: *— payment of \$43.75 previously sent.*

- | | | | |
|---|--|--|--|
| <input 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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Hia H Architecture + Interiors, 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, January 2007 and assigned Florida document number L07000004053.

This amendment is submitted to amend the following:

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

n/a
The new name must be distinguishable and contain 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

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

n/a

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TALLAHASSEE, FL

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:

n/a

New Registered Office Address:

n/a

Enter Florida street address

_____, Florida _____
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 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>
<u>MGR</u>	<u>Jacqueline Hriatt</u>	<u>2402 W Morrison ave #6</u>	<input checked="" type="checkbox"/> Add
		<u>Tampa, FL 33629</u>	<input type="checkbox"/> Remove
		<u>(Title - Vice president)</u>	<input type="checkbox"/> Change
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add
		<u> </u>	<input type="checkbox"/> Remove
		<u> </u>	<input type="checkbox"/> Change
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add
		<u> </u>	<input type="checkbox"/> Remove
		<u> </u>	<input type="checkbox"/> Change
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add
		<u> </u>	<input type="checkbox"/> Remove
		<u> </u>	<input type="checkbox"/> Change
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add
		<u> </u>	<input type="checkbox"/> Remove
		<u> </u>	<input type="checkbox"/> Change
<u> </u>	<u> </u>	<u> </u>	<input type="checkbox"/> Add
		<u> </u>	<input type="checkbox"/> Remove
		<u> </u>	<input type="checkbox"/> Change

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

We want to add Jacqueline Hratt in the title of Vice President. She is authorized to execute and file all records with the Division of Corporations, as well as the Internal Revenue Service.

E. Effective date, if other than the date of filing: _____ (optional)

(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)

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 9/27/2019

David W. Hratt President

Signature of a member or authorized representative of a member

David W. Hratt

Typed or printed name of signee