

LO8000065640

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

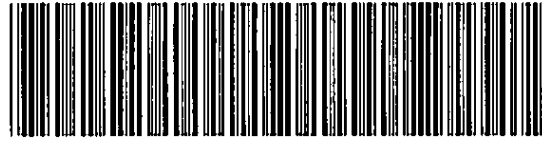
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 2, 2021

HCC SERVICES LLC
6464 CABALLERO BLVD
CORAL GABLES, FL 33146

SUBJECT: HCC SERVICES LLC
Ref. Number: L08000065640

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

The form you submitted is for a CORPORATION, but your entity is a LLC. 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.

Yasemin Y Sulker
Regulatory Specialist III

Letter Number: 121A00011933

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HHC Services LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cristina M Beaupertuy
Name of Person

HHC Services LLC
Firm/Company

6464 Caballero Blvd
Address

Coral Gables, FL 33146
City/State and Zip Code

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

For further information concerning this matter, please call:

Cristina M Beaupertuy at (305) 975.5119
Name of Person Area Code & Daytime Telephone Number

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

Enclosed is a check for the following amount:

- \$25 Filing Fee - *NOT enclosed see letter*
- \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: HHC Services LLC

2. (a) <u>HHC Services LLC</u> Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) <u>135 San Lorenzo Ave, Suite 730</u> <u>Coral Gables, FL 33146</u>	(b) <u>HHC Services LLC</u> Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) <u>135 San Lorenzo Ave, Suit 730</u> <u>Coral Gables, FL 33146</u>
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3. <u>7/7/2008</u> Date of filing/registration in Florida	4. <u>L08000065640</u> Document number
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5. (a) _____
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Carlos F de Mendia
 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
1120 S. Alhambra Cir
Coral Gables, FL 33146

(b) _____
 Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
Carlos G Mendia
NEW Registered Office Address:
101 Ocean Lane Dr., Apt 4017
Key Biscayne, FL 33149

1001
 7/5 AM 9:15
 210
 DE STATE
 SECRET FL

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

<u>Cristina M Beauperthuy</u> Signature of a member or authorized representative of a member	<u>Cristina Mendia Beauperthuy</u> Printed or typed name of signee
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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.

Carlos G. Mendia
 Signature of Registered Agent