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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: H. B. J. S Velasquez UC 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:
Sandra Velasquez Name of Person
Firm/Company
4990 SW 148th Ave.
Southwest Ranches, FL. 33330 City/State and Zip Code i Q 726 Q g mail · Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Sandra Velasquez at (305) 3089655 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$\$\sum{\$\sin{\$\sin{\$\sum{\$\sin{\$

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

H.B.J.S Velasque	z, LCC.
(Name of the Limited Liability Company as it r (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were fi Florida document number <u>LD9COO 109819</u> .	led on 11 16 2009 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability con	mpany here:
The new name must be distinguishable and contain the words "Limited Liability Comp	pany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here:	s on our records, enter the name of the new registere
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
Cit	
Now Devictored Agent's Signature if changing Registered Agent:	

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>	Address	Type of Action
<u>AMBR</u>	Jaime A. Velasquez	4990SW 148th Ave. SW Ranches, FL. 33330	NAdd
			□Remove
			□Change
AMBR	Sandra Velasquez	4990 SW 148th Ave. SW Ranches, Fl. 33330	i ⊻ Add
			Remove
			□Change
MGR	Sandra Velasquez	4990 SW 148th Ave. SW Ranches, FL. 33330	□Add
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cument's effective da	nte on the Department of Sta	te's records.			
record specifies	a delayed effective date	te, but not an eff	fective time, at 1	2:01 a.m. on	the earlier
The 90th day afte	er the record is filed.	•			
ned Feb 12	th, 2020.				
	or My	NERHU	125.		
		mber or authorized rep			

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Filing Fee: \$25.00