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COVER LETTER

	gistration Sec rision of Corp			
CUBIECT.	Hot Forever	LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	d Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspon	ndence concerning this matter	to the following:	
		Erik Mishiyev		
			Name of Person	
			Firm/Company	
Firm/Company 4504 W Spruce St. Suite #604 Address Tampa, FL 33607				
		Tampa, FL 33607		
		erikmishiyev@gmail.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report noti-	fication)
For further in	nformation co	oncerning this matter, please ca	all:	
Erik Mishiy	cv		917 727-4684	
	Name of	Person	Area Code Daytime	e Telephone Number
Enclosed is a	a check for th	e following amount:		
■ \$25.00 F	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, F1, 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

Hot Forever LLC			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document numberL10000016092 This amendment is submitted to amend the following:	were filed on 02-10-2007	and assigned	
-			
A. If amending name, enter the new name of the limited liab	ility company here:		
HOT4EVER LLC The new name must be distinguishable and contain the words "Limited Liabil	lity Company "the designation "LLC" or the a	bbreviation "L.L.C."	
Enter new principal offices address, if applicable:	5000 Culbreath Key Way		
(Principal office address MUST BE A STREET ADDRESS)	Suite #1-317		
	Tampa, FL 33611		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		the name of the ne	
Name of New Registered Agent:	·	<u> </u>	
New Registered Office Address:	Enter Florida street address Florida	FILE BLE	
	City	,- Zip Cazze	
New Registered Agent's Signature, if changing Registered Agent:		9: 5: 5: 5:	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am provided for in Chapter 605, F.S. Or	familiar with and , if this document is	

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added</u> or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
-			Add
			Remove
			Change
			Add
			☐ Remove
			Add
			☐ Remove
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Sective date, if other than the date is listed, the date must be ter. If the date inserted in this block cument's effective date on the Department.	c does not meet the applicable statutor	(optional) ing or more than 90 days after filing.) Pursual ry filing requirements, this date will not	it to 605.02 be listed a
record specifies a delayed e The 90th day after the record		tive time, at 12:01 a.m. on the	earlier
December 15	2017		
<i>^</i> -	777 1 1		

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Filing Fee: \$25.00