

L100000094743

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

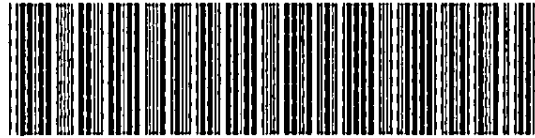
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300397030273

11/08/22--01012--031 ++50.00

2022 NOV -8 PM 1:40
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

COVER LETTER

Registration Section
Division of Corporations

2621 Hiatus LLC
SUBJECT: _____
Name of Limited Liability Company

enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Duane P. Bria

Name of Person

2621 Hiatus LLC

Firm/Company

2721 North Hiatus Road

Address

Cooper City, FL 33026

City/State and Zip Code

bogartsamericankitchen@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Duane P. Bria

954

441-6929

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 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, 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**

2621 Hiatus LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Articles of Organization for this Limited Liability Company were filed on 09/10/2010 and assigned
file number L10000094743.

This amendment is submitted to amend the following:

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

new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal office 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

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:

Enter Florida street address

City, Florida 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

ending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added
moved from our records:

. = Manager

R = Authorized Member

Name

Address

Type of Action

Byron Brown

2721 North Hiatus Road

☐ Add

Cooper City, FL 33026

☒ Remove

☐ Change

☐ Add

☐ Remove

☐ Change

☐ Add

☐ Remove

☐ Change

☐ Add

☐ Remove

☐ Change

☐ Add

☐ Remove

☐ Change

☐ Add

☐ Remove

☐ Change

2022 NOV - 8 PM 40
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

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


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 document is filed.

Effective date: November 1, 2022



Signature of a member or authorized representative of a member

Duane P. Bria

Typed or printed name of signee

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

2621 Hiatus LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Articles of Organization for this Limited Liability Company were filed on 09/10/2010 and assigned
a document number L10000094743.

Amendment is submitted to amend the following:

Amending name, enter the new name of the limited liability company here:

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)

Enter new mailing address, if applicable:

Mailing address MAY BE A POST OFFICE BOX)

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:

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

Adding Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added
or removed from our records:

- = Manager
- . = Authorized Member

<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
-------------	----------------	-----------------------

Byron Brown	2721 North Hiatus Road	<input type="checkbox"/> Add
	Cooper City, FL 33026	<input checked="" type="checkbox"/> Remove
		<input type="checkbox"/> Change

		<input type="checkbox"/> Add
		<input type="checkbox"/> Remove
		<input type="checkbox"/> Change

		<input type="checkbox"/> Add
		<input type="checkbox"/> Remove
		<input type="checkbox"/> Change

		<input type="checkbox"/> Add
		<input type="checkbox"/> Remove
		<input type="checkbox"/> Change

		<input type="checkbox"/> Add
		<input type="checkbox"/> Remove
		<input type="checkbox"/> Change

		<input type="checkbox"/> Add
		<input type="checkbox"/> Remove
		<input type="checkbox"/> Change

[illegible]

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.

ated November 1, 2022.

Signature of a member or authorized representative of a member

Duane P. Brya

Typed or printed name of signee