

L110000035754

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

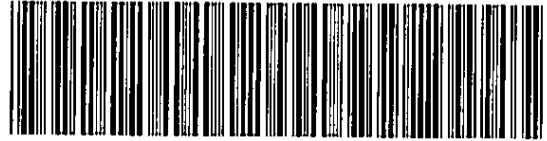
(Document Number)

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 1, 2021

TOUFIC BALLAS
1755 HALLANDALE BEACH BOULEVARD
SUITE 602
HALLANDALE, FL 33009

SUBJECT: HENDBURG HOLDING, LLC
Ref. Number: L11000035754

We have received your document for HENDBURG HOLDING, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

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.

Summer Chatham
OPS

Letter Number: 921A00015091

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Hendburg Holding, 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 03/24/11 and assigned
Florida document number L11000035754

This amendment is submitted to amend the following:

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

The 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)

1755 Hallandale Beach Boulevard, Suite 602

Hallandale, Florida 33009

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1755 Hallandale Beach Boulevard, Suite 602

Hallandale, Florida 33009

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:

Barbara Sanjurjo, P.A.

New Registered Office Address:

2630 SW 28 Street, Suite 61

Enter Florida street address

Coconut Grove

Florida 33133

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>
MGR	Toufic Ballas	1755 Hallandale Beach Boulevard, Suite 602	<input type="checkbox"/> Add
		Hallandale, Florida 33009	<input checked="" type="checkbox"/> Remove
		1755 Hallandale Beach Boulevard, Suite 602	<input type="checkbox"/> Change
MGR	Dim Capital LLC	Hallandale, Florida 33009	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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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.

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Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Hendburg Holding, 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:

Toufic Ballas

Name of Person

Firm/Company

1755 Hallandale Beach Boulevard, Suite 602

Address

Hallandale, Florida 33009

City/State and Zip Code

touficballas@gmail.com

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

For further information concerning this matter, please call:

Toufic Ballas

786

216-6525

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

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