Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000237825 3)))



H210002378253ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: LARSON ACCOUNTING AND CONSULTING SERVICES LLC Account Name

Account Number : I20160000067 : (407)370-3686 Phone

: (407)370-3120 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HIGH ENERGY INVESTMENTS LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

JUN 17 2021

A. LUNT

Electronic Filing Menu

Corporate Filing Menu

Help

TO:18506176383 FROM: 4073703120 06/16/2021 13:31 PM Page: 2

COVER LETTER

TO: Registration Sec Division of Corp					
	RGY INVESTMENTS LLC				
SUBJECT:	Name of Limi	ted Liability Company			
The enclosed Articles of A	Amendment and fee(s) are subt	nitted for filing.			
Please return all correspo	ndence concerning this matter t	o the following:			
	CAROLINE LARSON				
		Name of Person			
	LARSON ACCOUNTING	GROUP			
Firm/Company					
	7901 KINGSPOINTE PKWY STE 17				
		Address			
	ORLANDO, FLORIDA, 3				
		City/State and Zip Code			
	CAROL@LARSONACC.C	OM to be used for future annual report of	oufication)		
For further information of	concerning this matter, please co		,		
CAROLINE LARSON		407 370-3686			
Name of Person		at () Area Code Day	time Telephone Number		
Enclosed is a check for t	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed		
Mailing Addre Registration		Street Address Registration			
Division of (Corporations	Division of C	Corporations		
P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Tallahassee, FL 32314

Page: 3 '06/16/2021 13:31 PM TO:18506176383 FROM:4073703120

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HIGH ENERGY INVESTMENTS				
(Name of the Limit	ed Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited L Florida document number L12000035097	iability Company	were filed on 03/12/2012	and assigned	
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name o	f the limited liab	ility company here:		
LIONS BHZ LLC				
The new name must be distinguishable and contain the v	ords "Limited Liabi	lity Company," the designation "LLC" or the a	ibbreviation "L.L.C."	<u>:</u> 2
Enter new principal offices address, if applic	able:	NA	2	<u>₹</u>
(Principal office address MUST BE A STREET ADDRESS)				
				무유도
			თ ~	100 100 100 100 100
Enter new mailing address, if applicable:		NA		-335° -025°
(Mailing address MAY BE A POST OFFICE BOX)				PST A
(Multing undress MAT BEST 00: 0:1102	<u> </u>		38	_ <u>5</u> =
				Ŝ
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office ss here:	address on our records, <u>enter the na</u>	me of the new regi	<u>stered</u>
Name of New Registered Agent:	NA			_
New Registered Office Address:	NA			_
	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.

4 · 06/16/2021 13:31 PM Page:

TO:18506176383 FROM:4073703120

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
		NA	[:] Add
			□Remove
			Change
			□Remove
			□Remove
			□Change
			Z1 JUN 15 CORPORATION Change 21 JUN 15 CORPORATION Reg AM 5 38 dd
			—————————————————————————————————————
			ARPORT
			ATE AND
			Remove
			☐ Change
			Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) NA E. Effective date, if other than the date of filing: (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 record is filed. 2021 June 10 Dated Y Law O Signature of a member or authorized representative of a member FLAVIO CANCADO

TO:18506176383 FROM:4073703120

5 + 06/16/2021 13:31 PM

Page:

Filing Fee: \$25.00

Typed or printed name of signee