# L12-000042455

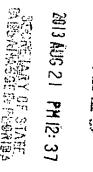
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### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT

# HASHTAG INVESTMENTS 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:

George M Santamarina

Name of Person

George M Santamarina PA

Firm/Company

13831 SW 59 Street, Suite 203

Address

Miami, FL 33183

City/State and Zip Code

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

For further information concerning this matter, please call:

George M Santamarina

305 408-6250

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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## HASHTAG INVESTMENTS LLC

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

(A Florida Linii	ned Liability Company)		
The Articles of Organization for this Limited Liability Complete Florida document number <u>L12000042455</u>	pany were filed on 03/27/20	012	and assigned
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 end with the words "L.L.C."	'Limited Liability Company," th	ne designation "LLC	" or the abbreviation
Enter new principal offices address, if applicable:		ा । मान्य	<u> </u>
(Principal office address MUST BE A STREET ADDRESS		<b>三</b>	
		(4)	N (4
		第二 行命	- 11
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		(2) (2) (2)	<u>ω</u>
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		ecords, <u>enter the</u>	name of the new
Name of New Registered Agent:			
New Registered Office Address:	Enter Flo	orida street addres.	<u></u>
		, Florida	
<del></del>	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 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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). If amending any other informa	ation, enter change(s) here: (Attach additional sheets, if necessary.)
ated August 20	2013
	min de la composition della co
Sig	gnature of a member or authorized representative of a member
George M San	itamarina /
<del></del>	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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