12000106425

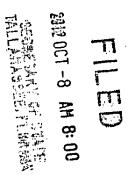
(Re	equestor's Name)	
(Ac	ldress)	
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(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Ви	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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08/27/12--01029--011 **35.00



J. BRYAN

EXAMINER



August 29, 2012

ODIJAS CAMINHA OGC ASSOCIATES PA 1239 E NEWPORT CENTER DRIVE DEERFIELD BEACH, FL 33442

SUBJECT: HATZ PROPERTIES LLC

Ref. Number: L12000106425

We have received your document for HATZ PROPERTIES LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6051.

Joey Bryan Regulatory Specialist II

Letter Number: 012A00022059

www.sunbiz.org

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COVER LETTER

TO:	Registration Sec Division of Corp			
SUBJE	CT: HATZ Prop	perties LLC		
••		Name of Limi	ted Liability Company	
The enc	losed:Articles of A	Amendment and fee(s) are sub	emitted for filing:	
Please re	eturn all correspon	ndence concerning this matter	to the following:	
	•	Odijas Caminha		
	•	•	Name of Person	TILED BOOT-8 H 8:00
y		OGC Associates PA	ي ب س	
			Firm/Company	6
		1239 E Newport Cente	r Drive Suite 106	
		1239 C Newport Center	Address	
				多
		Deerfield Beach, FL 33		
			City/State and Zip Code	
		ogc@ogcfinancial.com E-mail address: (to be used for future annual report notification)	
For furt	her information co	oncerning this matter, please.	ealt:	
Oc	lijas Caminha	•	at (954) 449-0716	
	Name of	Person	Area Code & Daytime Telephone	Number, *
Enclose	d is a check for the	e following amount:		
\$25.	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	0.00 Filing Fee, Estificate of Status & Certified Copy additional copy is enclosed)
		NG ADDRESS:	STREET/COURIER ADDI	RESS:

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	HATZ Properties LLC			·	<i>.</i>
	(Name of the Limite	Liability Compar A Florida Limited L	iy as it now appears lability Company)	on our records.)	
The Articles	of Organization for this Limited I	iability Company	were filed on 08/1	7/2012	and assigned
Florida docu	ment number <u>L12000106425</u>				
	•		t		
This amendr	nent is submitted to amend the fol	löwing:			
A. If amend	ling name, <u>enter the new name (</u>	of the limited llab	ility company here	:	
N/A	en e			,, · · · · ·	٠
Phe new nam	e must be distinguishable and end w	ith the words "Limi	ted Lisbility Compan	y," the designation "LLC"	or the abbreviation
Enter new p	orincipal offices address, if appli	cable:	N/A		
(Principal o	Mice address MUST BE A STRE	ET ADDRESS)			8
	•			E was	
Enter news	nailing address, if applicable:	•	N/A "		di I
(Mailing address MAY BE A POST OFFICE BOX)				WE C	
				· · · · · · · · · · · · · · · · · · ·	
	nding the registered agent and gent and/or the new registered o			ur records, enter the n	ame of the new
,	**************************************	N/A [;]			
	me of New Registered Agent:		<u> </u>		
Ne	w Registered-Office Address:	N/A	<u> </u>		م يوم المواضعة المواضعة المواضعة
	1		Enter Floridu street address		
		/ ************************************	City.	Florida	ip Code
			CHY.	Æ.	ip coup

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 Changing Registered Agent, Signature of New Registered Agent

If smending 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>	Name	Address	Type of Action
MGRM	Matheus Sena		A;dd
	et in the second of the second		X Remove
MGRM	Mateus De Sena Alves		X Add
			Remove .
			Add
			Remove
	·		Add
			Remove
	<u> </u>	· <u>January and a special and a</u>	Add
			Remove
 			Add
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		nge(s) here: (Attach additional sheets, if necessary.)	
}	N/A		
ARTHUR ARTHUR	HELD TO TRANSPORT		
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Dated Ser	otember 6 20°	12	AN 8: 00
	Mates de Jerc Signature of a memb	Here or authorized representative of a member	
	Mateus De Sena Alves	ed or printed name of signee	
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Page 2 of 2

Filing Fee: \$25.00