

L12000137001

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

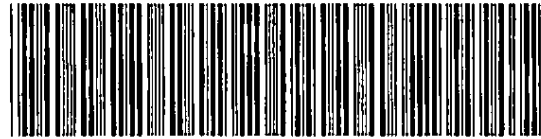
(Business Entity Name)

(Document Number)

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SULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 12, 2017

TERESA AH MOOLYIN MATISONN
18101 COLLINS AVE #4306
SUNNY ISLES BEACH, FL 33160

SUBJECT: HARD CASH LLC
Ref. Number: L12000137001

We have received your document for HARD CASH LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 017A00020671

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

HARD CASH 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 10/29/12 and assigned
Florida document number 112000137001.

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 "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

18101 COLLINS AVE., #4306

SUNNY ISLES BEACH

FL 33160

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

18101 COLLINS AVE # 4306

SUNNY ISLES BEACH

FL 33160

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:

TERESSA AH MOOI YIN MATISONN

New Registered Office Address:

18101 COLLINS AVE., # 4306, SUNNY ISLES BEACH

Enter Florida street address

MIAMI


Florida 33160

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	SZILVESZTER BALAZS	2395 SE 7TH ST.	<input type="checkbox"/> Add
		POMPANO BEACH	<input checked="" type="checkbox"/> Remove
		FL 33062	<input type="checkbox"/> Change
AMBR	SZILVESZTER BALAZS	2395 SE 7TH ST	<input type="checkbox"/> Add
		POMPANO BEACH	<input checked="" type="checkbox"/> Remove
		FL 2395	<input type="checkbox"/> Change
MNG	TERESA A.M.Y. MATISONN	18101 COLLINS AVE #4306	<input checked="" type="checkbox"/> Add
		SUNNY ISLES BEACH	<input type="checkbox"/> Remove
		FL 33160	<input type="checkbox"/> Change
AMBR	CARNIE MATISONN	18101 COLLINS AVE # 4306	<input checked="" type="checkbox"/> Add
		SUNNY ISLES BEACH	<input type="checkbox"/> Remove
		FL 33160	<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

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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.

Dated 4 OCTOBER 2017

TERESA A.M.Y. MATISONN

Filing Fee: \$25.00