L12 000 147 308

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #	A)
(,	,
PICK-UP WAIT	MAIL
(Business Entity Name	·)
(Document Number)	
,	
Certified Copies Certificates of	of Status
Certified Copies Certificates C	or Status
Special Instructions to Filing Officer:	

Office Use Only S.C.

06/25/21



100366904501

 $\widetilde{\mathbb{C}}^{(0)}(\mathbb{C}^{d},\mathbb{C}^{n}) := \widetilde{\mathbb{C}}(\{0\}^{n}) = -\widetilde{\mathbb{C}}(\{4\}^{n}) \oplus \phi_{n}^{(n)}(\{\beta\}^{n})$

1011 BAY 24 A 11: 24



COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	porations		
SUBJECT:	Ha Cienda Name of Lin	Investments, LLC nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Jon	uthan E. Jones Name of Person	
	Haciens	la Ivestments LLC Firm/Company	
	2099 Ta	fon Lake Way	
	West Palm 1	Beach FL 334// City/State and Zip Code	
	Joves & Simuladores:	Seach FL 334// City/State and Zip Code i oves Florida law. Com (a) be used for future annual report notification)	107) 1::Y 24
For further information c	oncerning this matter, please of	rall;	
Jon at Name o	tian Jores F Person	at (<u>561</u>) <u>827-043</u> Area Code Daytime Telepho	y → J one Number ≥ Z
Enclosed is a check for the	ne 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 9	Section	Street Address: Registration Section	
Division of C P.O. Box 632		Division of Corporatio The Centre of Tallahas	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Haciende	Investments.	LCC		
(<u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appears on a Limited Liability Company)	our records.)		
The Articles of Organization for this Limited Liability C Florida document number 412 000/47308	ompany were filed on ${}$.	26/2012	and a	ssigned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limi	ited liability company here:			
N/	4			
The new name must be distinguishable and contain the words 7. im	ited Liability Company," the designa	ation "LLC" or the	abbreviation "	L.L.C."
Enter new principal offices address, if applicable:		V/A		
(Principal office address MUST BE A STREET ADDR	RESS)			
Enter new mailing address, if applicable:		N/A	2021	\bigcirc
(Mailing address MAY BE A POST OFFICE BOX)		*/ //		•
		·····	24	* po-
			<u> </u>	. 1
B. If amending the registered agent and/or registered	d office address on our record	ds, <u>enter the na</u>	me of the n	ew.registered
agent and/or the new registered office address here:			24	
Name of New Registered Agent:	N	1/A		
New Registered Office Address:				
<u>-</u>	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.

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>	Address	Type of Action
<u>MGRM</u>	Sandra B. Jones	2099 Turpon Lake Way	□Add
		2099 Turpon Lake Way West Palm Beach, FL 33	HI Remove
			□Change
			□Add
			□Remove
			Change
	 		□Add
			□Remove
			Change
		☐Change	
			<u></u> □Change
		<u> </u>	□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

-		N/A	·			
			.			
						
				<u> </u>		
						
						
					· · · · · · · · · · · · · · · · · · ·	
						C
					167	
			·····			
					21	
					-	
					2	
				·		
Mective date, if other an effective date is listed ote: If the date insert ocument's effective date.	the date must be speci ed in this block does	fic and cannot be prior to not meet the applicable	late of filing or more that e statutory filing requ	(optional n 90 days after filing frements, this date	a.) Pursuant	: to 605.020 be listed a
record specifies a dela is filed.	yed effective date, b	ut not an effective time	, at 12:01 a.m. on the	earlier of: (b) T	he 90th da	y after the
	10	. 2021		-	A	_