# L130000 12537

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### **COVER LETTER**

**Registration Section Division of Corporations** 

## HAYRETTIN SUHA HAKTAN COLAKOGLU 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:

SUHA COLAKOGLU
Name of Person
Firm/Company
7875 PLEASANT PINE CIR
Address
WINTER PARK/FL/32792
City/State and Zip Code
ussuha@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

suha		407 e	366 7686
Name	of Person	Area Code	Daytime Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee &	□ \$55.00 Filing Fee	± & □ \$60.00 Filing Fee,

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

Certificate of Status

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

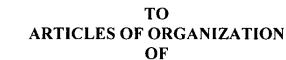
#### STREET/COURIER ADDRESS:

Certificate of Status & Certified Copy

(additional copy is enclosed)

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

## ARTICLES OF AMENDMENT TO **OF**



HAYRETTIN SUHA HAKTAN COLAKOGLU LLC

( <u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L13000012537</u>	were filed on January 24, 2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and end with the words "Limited Lial	bility Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:	7875 PLEASANT PINE CIR	<b>_</b>
(Principal office address MUST BE A STREET ADDRESS)	WINTER PARK, FL 32792	90 cm
		<b>노</b> 기계
		\(\frac{1}{2}\)
Enter new mailing address, if applicable:	7875 PLEASANT PINE CIR	
(Mailing address MAY BE A POST OFFICE BOX)	WINTER PARK, FL 32792	<u> </u>
,		<u> </u>
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		he name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	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

ding the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or orized Member being added or removed from our records:

۹. ,

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			Remove
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		<del></del>	Add
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inending any other information	on, enter change(s) here: (Attach addi	tional sheets, if necessary.)
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ective date, if other than the d	ate of filing: be prior to date of receipt or filed date and cannot	(optional)
effective date must be specific, cannot		ot be more than 90 days after
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Page 3 of 3

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