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(Address)

(Address)

(City/State/Zip/Phone #)

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JUL 30 2013

T. HARRINGTON

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: HAYYAT

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:

MAZEN MBAYED

Name of Person

Firm/Company

9211 NW 13 PL

Address

CORAL SPRINGS, FL 33071

City/State and Zip Code

MMBAYED@GMAIL.COM

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

For further information concerning this matter, please call:

AHED MCDANIEL

Name of Person

954 591-2871

at ()

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

HAYYAT LLC

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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>	<u>Address</u>	<u>Type of Action</u>
MGRM	NADINE MOUBAYED	320 W 111 ST NEW YORK, NY 10026	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	ALI HAMOUDAH	320 W 111 ST NEW YORK, NY 10026	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	AHED MCDANIEL	9211 NW 13 PL CORAL SPRINGS, FL	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated JULY 26, 2013.



Signature of a member or authorized representative of a member

MAZEN MBAYED

Typed or printed name of signee

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Filing Fee: \$25.00

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