

11/10/22, 11:05 AM

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : TAX S PRO CORP
Account Number : 120200000147
Phone : (786)307-2733
Fax Number : (954)420-7118

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: **INFO@TAXSPRO.COM**

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
BLACK HOOF LLC**

Certificate of Status	1
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2022 NOV 10 PM 5:15
TALLAHASSEE, FL 32310
CLERK OF SUPERIOR COURT

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Corporate Filing Menu

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K. SALY

NOV 14 2022

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BLACK HOOF 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:

ANWAR I PUELLO

Name of Person

TAX S PRO CORP

Firm/Company

8030 PINES BLVD

Address

PEMBROKE PINES , FL 33024

City/State and Zip Code

INFO@TAXSPRO.COPM

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

For further information concerning this matter, please call:

ANWAR I PUELLO

786 307-2733

at ()

Name of Person

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
2022 NOV 10 PM 5:15
TALLAHASSEE, FLORIDA

BLACK HOOFF 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 05/28/2013 and assigned
Florida document number 1.13000077300

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

HTZ WORLD LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

4163 NW 135 ST

(Principal office address MUST BE A STREET ADDRESS)

OPA LOCKA, FL 33054

Enter new mailing address, if applicable:

4163 NW 135 ST

(Mailing address MAY BE A POST OFFICE BOX)

OPA LOCKA, FL 33054

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:

TAX S PRO CORP

New Registered Office Address:

8030 PINES BLVD

Enter Florida street address

PEMBROKE PINES

City

Florida 33024

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	RODRIGUEZ, LUIS A	2611 DAVIE BLVD 102	<input type="checkbox"/> Add
		FT LAUDERDALE, FL 33312	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	TORO BARROS, HANSEL JAIR	4163 NW 135 ST	<input checked="" type="checkbox"/> Add
		OPA LOCKA, FL 33054	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	MATA ESPINAL, THOMAS F	4163 NW 135 ST	<input checked="" type="checkbox"/> Add
		OPA LOCKA, FL 33054	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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2022 FEB 10 PM 5:16
CLERK OF DISTRICT COURT
JULIA M. STANLEY, CLERK

Filing Fee: \$25.00