

L13000136173

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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2015 AUG 14 P 1:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

AUG 17 2015

S MASON



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 13, 2015

JAMES T. PASCHAL, SR.
6015 SILVER OAK DRIVE
FT. PIERCE, FL 34982

SUBJECT: MYHOTSPOTCITY.COM, LLC
Ref. Number: L13000136173

We have received your document for MYHOTSPOTCITY.COM, LLC and your check(s) totaling \$60.00. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is L15000131778 FASCINATIONCITY.COM, LLC.

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.

Stacey M Mason
Regulatory Specialist II

Letter Number: 015A00017104

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MYHOTSPOTCITY.COM, 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:

JAMES T PASCHAL, SR.
Name of Person

MYHOTSPOTCITY.COM, LLC
Firm/Company

6015 SILVER OAK DR.
Address

FT. PIERCE, FL. 34982
City/State and Zip Code

MAZINGHORSE@AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JAMES T. PASCHAL at (772) 528-9104
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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

MY HOTSPOTCITY.COM, 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 09-26-2013 and assigned Florida document number L13000136173

This amendment is submitted to amend the following:

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

FASCINATION CITY.COM, 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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

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

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TALLAHASSEE, FLORIDA

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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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TALLAHASSEE, FLORIDA

August 15, 2015

Stacey Mason
Department of State
Division of Corporations
LLC Section

I have dissolved the new LLC - Fascinationcity.com - L15000131778. I have no intention of reinstating it and I'm releasing the name to myself for use in the amendment.

Thank you,

James T. Paschal Sr.

James T. Paschal, Sr.

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TALLAHASSEE, FLORIDA