13000156709

7.	(Requestor's Name)			
	(Address)			
	(Address)			
	(City/State/Zip/Phone #)			
PICK-L	P WAIT MAIL			
	(Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
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TALLAHASSEE, FL

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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	H&H REAL ESTATE INVESTING	G, I.LC	
30031		imited Liability Con	ipany
Dear S	iir or Madam;		
The en	oclosed Amendment or Cancellation of State	ement of Authority ar	id fee(s) are submitted for filing.
Please	return all correspondence concerning this n	natter to the following	<u>;</u> :
HUNT	TER HAYDEN		
	Name of Person		-
н&н	REAL ESTATE INVESTING, LLC		
	Firm/Company		-
9310 (OLD KINGS ROAD S, SUITE 1702		
	Address		-
JACK	SONVILLE, FL 32257		
	City/State and Zip Code		-
hunter	@haydenhawk.com		
	E-mail address: (to be used for future am	nual report notification	on)
For fur	rther information concerning this matter, ple	case call:	
HUNT	TER HAYDEN	904 at (742-2658
	Name of Person	Area Code	Daytime Telephone Number
	Mailing Address:		Street Address:
	Registration Section Division of Corporations		Registration Section Division of Corporations
	P.O. Box 6327		The Centre of Tallahassee
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

AMENDMENT OR CANCELLATION OF STATEMENT OF AUTHORITY

Pursuant to section 605.0302(2), Florida Statutes, this limited liability corporates. The name of the limited liability company is: H&H REAL ES	ompany submits the following: STATE INVESTING, LLC
SECOND: The Florida Document number of the limited liability compa	L13000156709
THIRD: The street address of the limited liability company's principal 9310 OLD KINGS ROAD S. SUITE 1702	office is:
JACKSONVILLE, FL 32257	
The mailing address of the limited liability company's princip 9310 OLD KINGS ROAD S. SUITE 1702	pal office is:
JACKSONVILLE, FL 32257	
FOURTH: The date the statement of authority became effective is:	IUNE 27, 2018
FIFTH: The statement of authority is cancelled. OR	PISEP 15
The amendment to the statement of authority is	RY OF STAT
Signature of authorized representative	HUNTER HAYDEN, MANAGER Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)