

JUN 23 2014  
D. BRUCE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 11, 2014

GUTHO BONZIL  
582 KOALA DRIVE  
KISSIMMEE, FL 34759

SUBJECT: HAPPY LIVING LLC  
Ref. Number: L14000001396

We have received your document for HAPPY LIVING LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 014A00012628

FILED  
2014 JUN 20 PM 1:59  
CLERK OF STATE  
TALLAHASSEE  
FLORIDA

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: HAPPY LIVING 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:

GUTHO BONZIL  
Name of Person

HAPPY LIVING LLC  
Firm/Company

582 KOALA DRIVE  
Address

KISSIMMEE FL 34759  
City/State and Zip Code

gubonzil@hotmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GUTHO BONZIL at (321) 442-5183  
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

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2014 JUN 20 PM 1:59  
TALLAHASSEE FLORIDA  
CLERK OF STATE

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

HAPPY LIVING 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 01/03/2014 and assigned  
Florida document number L 140000013916

This amendment is submitted to amend the following:

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

HAPPY LIVING OF FLORIDA LLC

The new name must be distinguishable and end with 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**)

N/A

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

N/A

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:

N/A

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

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
<u>MGR</u>	<u>MARIE EDMOND</u>	<u>10017 WINDING LAKE RD #104</u>	<input type="checkbox"/> Add
		<u>SUNRISE, FL 33351</u>	<input checked="" type="checkbox"/> Remove
<u>MGR</u>	<u>NATALIA D. PAUL</u>	<u>409 TAMARIND PARKE LN.</u>	<input checked="" type="checkbox"/> Add
		<u>KISSIMMEE, FL 34758</u>	<input 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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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2014 JUN 20 PM 2:00  
CLERK OF STATE  
TALLAHASSEE FL 32304

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

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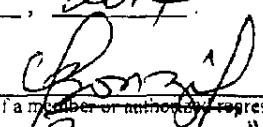
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)  
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated June 23, 2014.

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member  
Gustavo Bonzif  
\_\_\_\_\_  
Typed or printed name of signee

**FILED**  
2014 JUN 20 PM 4:00  
CLERK OF STATE  
TALLAHASSEE FLORIDA