14000008522

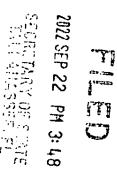
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
wan and minde
Drong Jour

Office Use Only



200390866892

07.13v22~-0101017--621 ++35.140



Smend

JAN 2 4 2023 D CUSHING

COVER LETTER

Corporation Section Division of Corporations

SUBJECT: SCOTT HES	Name of Limited Liability Company	
	Name of Limited Liability Company	
•		
The enclosed Articles of Amendment	t and fee(s) are submitted for filing.	
Please return all correspondence cond	cerning this matter to the following:	
	Scott Hess	
	Name of Person	_
	SCUTT HESS ASSOCIATES LLC Firm/Company	_
	Co	
	18117 BISCAYNE BUD #17	
	Address	_
	AUGUTURA FL 33160 City/State and Zip Code	
		2022 SEP 22 PM 3: 48 SECRETARY OF CIVIE LIALL CHASSON FU
	Hamil address: (to be used for future annual report notification)	P 2
For further information concerning the	bis matter please call:	第2 - [
		PARY OF S
SCOT HELL	at (786) 95(8756	
Name of Person	at (786) 95(8756 Area Code Daytime Telephone Number	ल मि
Enclosed is a check for the following	amount:	
_	00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 I	Filina Foe
	ificate of Status Certified Copy Certific	eate of Status &
* ALREADY PAID \$135	(additional copy is enclosed) Certific	ed Copy al copy is enclosed)
•		
Mailing Address:	Street Address:	
Registration Section	Registration Section	
Division of Corporation		
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite	810
Tallahassee, FL 32314	2415 N. Monroe Street, Suite	810

Tallahassee, FL 32303

Scott Hess Associates, LLC 18117 Biscayne Blvd., #17 Aventura, FL 33160

12/20/2022

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Attn: Mrs. Diane Cushing

Ref: your letter 322A00028347 dated 12/20/22 and received on 12/30/22.

Dear Mrs. Cushing:

Please find enclosed your original letter and forms Articles of Amendment for Scott Hess Associates LLC. With all due respect, our original request and payment was sent on July 13, 2022 with more than enough time for your department to process our request of amendment. (your standard lead time has been 2-4 weeks) Having said that, your department had more than enough time to process our request before the renewal date of our company. Therefore we expect your department to comply with our request as well as your duties. Kindly let us know if you should have additional any questions,

Simperely

John A. Hess

MĞR

Copy:

L. Sosa - esquire



October 24, 2022

ROY SILVA AMERICANA LLC 18117 BISCAYNE BLVD., PMB 17 AVENTURA, FL 33160

SUBJECT: SCOTT HESS ASSOCIATES, LLC

Ref. Number: L14000008522

We have received your document for SCOTT HESS ASSOCIATES, 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):

The form you submitted is for a Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

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) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 422A00023857

DEAR MAI CUSITING,

THANK YOU FOR YOUR KIND ATTENTION,

-:- Hd

Rene



December 20, 2022

SCOTT HESS SCOTT HESS ASSOCIATES LLC 18117 BISCAYNE BLVD #17 AVENTURA. FL 33160

SUBJECT: SCOTT HESS ASSOCIATES, LLC

Ref. Number: L14000008522

We have received your document for SCOTT HESS ASSOCIATES, 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):

Please accept our apology for failing to mention this in our previous letter.

Your company was administratively dissolved for failing to file the 2022 annual report on 09/23/2022. You will need to reinstate the company to make it active and you can make the changes you have requested in the amendment on the reinstatement.

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) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 322A00028347

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Scott Hess Asso (Name of the Limited Liability (A Florida	ty Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability C Florida document number <u>L14 00000 8522</u>	
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limi	ited liability company here:
The new name must be distinguishable and contain the words "Lim Enter new principal offices address, if applicable:	ited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
(Principal office address MUST BE A STREET ADDR	PESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	d office address on our records, enter the name of the new registered
agent and/or the new registered office address here:	white address on our records, enter the name of the new registered
Name of New Registered Agent: New Registered Office Address:	Enter Florida street address
	, Florida

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.

City

Zip Code

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>	Address	Type of Action
NGR	RENE B. GIOIA In	18117 BISCAYNE BUD #17	□Add
		AUGUTURA FL 33160	Remove
			□Change
MER	ScoT Hess	18117 BISCAYNE BLUD #17	🔀 Add
		AUGNTURA FL 33160	□Remove
			□Change
			🗆 Add
			□Remove
			□Add
			□Remove
		<u></u>	□Add
			Remove
			🗆 Add
			Remove
			□Change

-	
ee e	La Malanda Abada Cilina (ontional)
<u> lote:</u> If	e date, if other than the date of filing:
record : I is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the l.
ated	11.06.2022
	4
	Signature of a member or authorized representative of a member
	Typed or printed name of signee