L14000067082

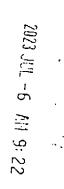
(Re	equestor's Name)	 .
(Ad	ldress)	
/Δ/	dress)	
(riu	uie33)	
(Cit	y/State/Zip/Phone #)	
		
PICK-UP	MAIT	MAIL
(Bu	siness Entity Name)	<u> </u>
\-		
(D0	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Cities Office	
Special instructions to	riling Officer.	
	 -	

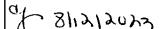




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07/06/23--01018--010 **25.00





COVER LETTER

Divisio	on of Corpo	rationș		
SUBJECT: _	HAK	BORSIDE h	IH LLC	·
		Name of Limi	ted Liability Company	
The enclosed A	rticles of An	nendment and fee(s) are subr	nitted for filing.	
Please return al	l correspond	ence concerning this matter t	to the following:	
		TIM	KIRBY Name of Person	
		HAR BOR.	SIDE WH C	LLC
			Firm/Company	
		2435 7	TH ST SW	
			Address	·
		WINTERH	AVEN FL	33880
			City/State and Zip Code	.
		E-mail address: (1	City/State and Zip Code harborside for be used for future annual report r	otification)
For further info	rmation con	cerning this matter, please ca		
TIM	KIRB	4	at (<u>443</u>) <u>895</u>	-8050
	Name of Po	erson	Area Code Day	time Telephone Number
Enclosed is a ch	neck for the t	following amount:		
□ \$25.00 Fili	ng 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

Registration Section

TO:

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

· HArborsio	E WH	LLC	20	023 JUL -6 Mi 9: 22
(Name of the Limited (A			i our records.)	
The Articles of Organization for this Limited Liab Florida document number <u>L/400067</u>	oility Company w		4/24/	2014 and assigned
This amendment is submitted to amend the follow	/ing:			
A. If amending name, enter the new name of t	he limited liabili	ty company here:		
The new name must be distinguishable and contain the work	ds "Limited Liability	Company," the desig	nation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicab	ole:			
(Principal office address MUST BE A STREET	ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BE	<u>9x)</u>	2435 WINTER	7TH ST 2 HAVE,	SW N FL 33880
B. If amending the registered agent and/or reg agent and/or the new registered office address		dress on our reco	rds, <u>enter the na</u>	me of the new registered
Name of New Registered Agent:		KIRBY		
New Registered Office Address:	2435	771/ST Enter Florida	SW	
				27067)
	WINIDA	2 HAVEN	, Florida _	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.

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>	Address	Type of Action
MGR	DAVID SPINDGATTI	14657 MAGNOLIA RIDGELO	⊃P □Add
		WINTER GARDEN, FL	Remove
		34787	□Change
MGR	TIM KIRBY	2435 7M ST SW	⊠Add
		Winfor Havin, FL	□Remove
		33880	□Change
			□Add
			□Remove
			□Change
			□Add
		<u></u>	□Remove
			Change
 			□Add
			□Remove
		·	□Change
			□Add
			□Remove
			□Change

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	8/1/2023
(If an effective Note: If t	
(If an effective Note: If the document of the record specific of the	re date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the statutory filing requirements.
(If an effective Note: If the document of the record specific of the	re date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (she date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the seffective date on the Department of State's records.
(If an effective Note: If to document) the record space cord is filed.	re date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to seffective date on the Department of State's records.
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(If an effective Note: If to document) the record space cord is filed.	re date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to seffective date on the Department of State's records.

Filing Fee: \$25.00