L150006 79697

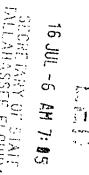
| (Requestor's Name) | |
|---|--------------------|
| (Address) | 3002868574 |
| (Address) (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | |
| (Business Entity Name) | 06/16/1601006(|
| (Document Number) | |
| Certified Copies Certificates of Status | |
| Special Instructions to Filing Officer: | ALLAHASSEE FLORIDA |
| | |

Office Use Only



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June 17, 2016

NIKOLAS VEZYROPOULOS 4120 N 42ND TERR HOLLYWOOD, FL 33021

SUBJECT: HERMES LAND HOLDINGS, LLC

Ref. Number: L15000079697

We have received your document for HERMES LAND HOLDINGS, 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 the corrected original and one copy of 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.

Justin M Shivers Regulatory Specialist III Registration/Qualification Section

Letter Number: 216A00012753

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT HERMES LAND HOLDINGS, LLC

Name of Corporation

DOCUMENT NUMBER

.15000079697

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Nikolas Vezyropoulos

Name of Contact Person

Hermes Land Holdings, LLC

Firm/Company

4120 N 42nd Terrace

Address

Hollywood, FL 33021

City/State and Zip Code

kalymnos1986@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nikolas Vezyropoulos

,727

504-4480

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida

| Principal office address of limited liabili (Note: MUST BE STREET ADD | ty company: | Y120 N. Y2nd Ter., Hollywood, F. Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | <u>. </u> |
|---|--|---|--|
| | | | _ |
| 5/21/15 | | L15000079697 | |
| Date of filing/registration in Fl | orida 4. | Document number | |
| Victoria Vezyropoul | 08, Es . | | |
| Registered Agent and Registered Office shown of | | pept. of State: | |
| | | | |
| Registered Office Address (MUST BE FLO | RIDA STREET ADDRESS) | | |
| | | $\overline{\Sigma}_{G}$ | |
| | AVE | <u> </u> | |
| Hollywood | ,FL 33 | 021 골품 <u>등</u> | |
| | | | |
| Victoria Vezyrox | poulos | | |
| Enter name of NEW Registered Agent and/or M | | | |
| Liner name of NEW Registered Agent and/or P | regis register en Office augr | | |
| 4120 N 42nd | Terrace | | |
| | 171146 | | |
| NEW Registered Office Address: | | | |
| | | | |
| | | | |
| Holly wood | r 330 | 21 | |
| | , FL, | | |
| mited liability company is not organized | d under the laws of the S | tate of Florida, it is hereby confirmed that after | |
| nge or changes are made, the Florida str | eet address of the registe | ered office and the business office of the register | red |
| vill be identical. Or in the case of a Flo | rida limited liability con the members of the limit | npany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in | ı |
| icles of organization of the operating agr | eement of the limited lia | bility company. | |
| (10) | , | Vikolas Vezyro poulos angre Printed or typed name of signee | |
| ture of a member of authorized representative of a | a member | Printed or typed name of signee | _ |
| • | | n this capacity. I further agree to comply with t | _ |

Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered