

2150000083666

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

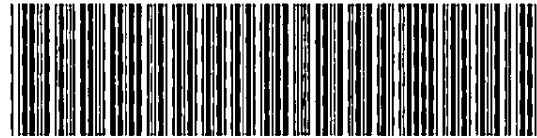
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 JUN 10 AM 7:42

8/27/2022

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 836 NW 3RD 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:

Wayne A Clarke
Name of Person
Hosanna Properties, Inc
Firm/Company
6630 NW 41 Street
Address
Coral Springs, FL 33067
City/State and Zip Code
hosannaprops@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

[illegible]

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 Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

June 6, 2022

To: Florida Department of State

Fm: Wayne A Clarke

Re: 836 NW 3RD LLC Amendment Request

Enclosed is an application of amendment to add authorized members to the LLC.

If you have any questions, I can be reached at my daytime phone # (954) 553-9858.

My Return Address 6630 NW 41st Street, Coral Springs, FL 33067

Thanks,

Wayne A Clarke

2022 JUN 10 AM 7:43

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

This amendment is submitted to amend the following:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

Florida

611

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 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Wayne A Clarke	6630 NW 41 Street	<input checked="" type="checkbox"/> Add
		Coral Springs, FL 33067	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Gena Clarke	6630 NW 41 Street	<input checked="" type="checkbox"/> Add
		Coral Springs, FL 33067	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

[illegible]

(If an effective 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 (3)(b)

If the record 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 record is filed.

Wayne A. Clarke
Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00