# 115000130494

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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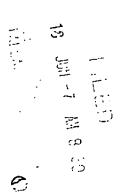
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## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Hillsboro Powerline	Subway, LLC			
·			<del></del>	
				Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
				L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
				Art, of Amend. File
				RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
			·	Cert. Copy
				Photo Copy
			<del></del>	Certificate of Good Standing
			<del></del>	Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
				Fictitious Search
Signature	<del></del>			Fictitious Owner Search
				Vehicle Search
		<b>_</b>	<del></del>	Driving Record
Requested by: Seth	06/07/18			UCC 1 or 3 File
Name	<del></del>	me		UCC 11 Search
				UCC 11 Retrieval
Walk-In	Will Pick Up			Courier

### **COVER LETTER**

	istration S ision of Co	rporations		
SUBJECT:	HILLSBO	ro powerline subway	LLC	
GODOLC 1		Name of Lie	mited Liability Company	
The enclosed	Articles of	Amendment and fec(s) are su	bmitted for filing.	
Please return	all correspo	ondence concerning this matte	r to the following:	
		ROBERT SOCOL		
			Name of Person	
		ARS & ASSOCIATES IN	rc .	
			Firm/Company	<del></del>
		20810 WEST DIXIE HIG	HWAY	
			Address	
		MJAMI, FL 33180		
		· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
		ROB@ARSACCOUNTING		
For further infe	ormation co	nneerning this matter, please co	to be used for future annual report noti all:	lication)
ROBERT SOC				
	Name of	Person	at () Area Code Daytime	c Telephone Number
Enclosed is a c	heck for th	e following amount:		
≅ \$25.00 Fili	ng Fee	□ \$30.00 Filing Foe & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fcc, 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 Conter Circle Tallahassee, FL 32301

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HILLSBORO POWERLINE SUBWAY LLC	•
(Name of the Limited Liability (A Florida	y Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co	ompany were filed on 07/30/2015 and assigned
Florida document number L15000130494	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ted liability company here:
HILLSBORO POWERLINE SUB LLC	63
The new name must be distinguishable and contain the words "Limit	ted 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 ADDRE	ESS)
	(2)
	3
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	<u></u>
	· · · · · · · · · · · · · · · · · · ·
<ol> <li>If amending the registered agent and/or registered agent and/or the new registered office addre</li> </ol>	ered office address on our records, enter the name of the ess here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
, <del></del>	, Florida, 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.

If Changing Registored 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>	Name	Address	Type of Action
MGR	MOHAMMAD W AKHTAR	22112 MARTELLA AVE	
		BOCA RATON, FL 33433	Remove
		<del>~</del>	☐ Chango
MGR	ROBERT SOCOL	20810 WEST DIXIE HIGHWAY	■ Add
	·	MIAMI, FL 33180	☐ Remove
			Change
MGR	ANDREW SOCOL	20810 WEST DIXIE HIGHWAY	Add
		MIAMI, FL 33180	Remove
			U Change
<u></u>			- Add
			□ Remove
		<u> </u>	☐ Chânge
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lots: If the date inserted in the	the date of filing:  e must be specific and cannot be prior to date of filing on the block does not meet the applicable statutory file. Department of State's records.	(optional) or more than 90 days after filing.) Pursuant to 605.0207 filing requirements, this date will not be listed as
e record specifies a del The 90th day after the	ayed effective date, but not an effectiv record is filed.	re time, at 12:01 a.m. on the earlier of
	2018	
6/7	2010	
ated <u>6/7</u>		
ated 6/7	Signature of a member or authorized representat	

Page 3 of 3

Filing Fee: \$25.00