

L15000 141 565

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

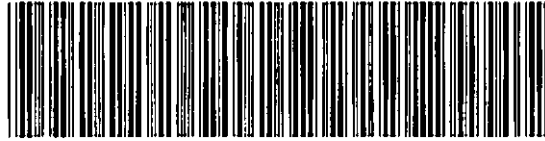
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12/16/19 010/5 016

12/16/19--010/5 016
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
2020 FEB 11 PM 6:08

FILED

FEB 11 2020
S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 16, 2020

YVETTE RASHID
UNIVERSAL ACCOUNTING & FINANCIAL SERVICE
2691 E OAKLAND PARK BLVD STE 302
FORT LAUDERDALE, FL 33306

SUBJECT: HASHTAG TRADE, LLC
Ref. Number: L15000141565

We have received your document for HASHTAG TRADE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

MUST SIGN NAME NOT PRINT

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.

Shelia H Young
Regulatory Specialist II

Letter Number: 420A00001206

2020 FEB 11 PM 12:28

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HASHTAG TRADE 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:

YVETTE RASHID

Name of Person

UNIVERSAL ACCOUNTING & FINANCIAL SERVICES

Firm/Company

2691 E OAKLAND PARK BLVD STE 302

Address

FORT LAUDERDALE, FL 33306

City/State and Zip Code

info@universalaccountingfinancial.com

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

For further information concerning this matter, please call:

YVETTE RASHID

954 728-8982

at ()

Name of Person

Area Code

Daytime Telephone Number

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

HASHTAG TRADE LLC.

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

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2020 FEB 11 PM 6:08

FILED

The Articles of Organization for this Limited Liability Company were filed on 08/19/2015 and assigned
Florida document number L15000141565.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)

19900 E Country Club Dr

#TS16

Aventura, FL 33180

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

19900 E Country Club Dr

#TS16

Aventura, FL 33180

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:

UNIVERSAL ACCOUNTING & FINANCIAL SERVICES INC.

New Registered Office Address:

2691 E OAKLAND PARK BLVD STE 302

Enter Florida street address

FORT LAUDERDALE

City

Florida 33306

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>
MGR	CABRAL, ALEXANDRE	19900 E Country Club Dr	<input checked="" type="checkbox"/> Add
		#TS16	<input type="checkbox"/> Remove
		Aventura, FL 33180	<input type="checkbox"/> Change
MGR	ABOU JOKH, LEILA	19900 E Country Club Dr	<input type="checkbox"/> Add
		#TS16	<input type="checkbox"/> Remove
		Aventura, FL 33180	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

2019

Leila Abou-Jokh

Signature of a member or authorized representative of a member

ABOU JOKH, LEILA

Typed or printed name of signee

Filing Fee: \$25.00