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R. WHITE FEB 0 4 2020

COVER LETTER

TO:

Registration Section

Division of Cor	porations				
	HT INVESTMENTS LLC	:			
SUBJECT:	Name of Lin	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	CESARINA LUGO				
		Name of Person			
	EAGLE CORPORATE SERVICES				
		Firm/Company			
	444 BRICKELL AVE. SU	ITE P-41			
		Address			
	MIAMI FL, 33131				
		City/State and Zip Code			
	CORPORATE@EAGLEIN				
	E-mail address: (to be used for future annual report not	ification)		
For further information c	oncerning this matter, please c	all:			
CESARINA LUGO		786 5352628			
Name of Person		at () Area Code Daytin	ne Telephone Number		
Enclosed is a check for the	he 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 S Division of C P.O. Box 632	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of	rporations Fallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



SPEEDLIGHT INVESTMENTS LLC

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(Name of the Limited (A	Liability Company as it now appear Florida Limited Liability Company)	rs on our records.)
The Articles of Organization for this Limited Liab Florida document number	oility Company were filed on	2/23/2015 and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of the	he limited liability company he	ere:
The new name must be distinguishable and contain the work	ds "Limited Liability Company," the d	designation "L.L.C" 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 BO	<u> </u>	
B. If amending the registered agent and/or reg agent and/or the new registered office address		records, enter the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Flor	rida street address
		, Florida
	City	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 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	ARTHUR KULICK	936 SW 1 Avenue #103 Miami, FL 33130	□ Add
			Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
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ffective date, if other than the date an effective date is listed, the date must be selected. If the date inserted in this block a document's effective date on the Depart	does not meet the applica	able statutory filing ((optiona e than 90 days after filir requirements, this da	l) ng.) Pursuant to 605.0207 (te will not be listed as t
record specifies a delayed effective dat d is filed.	te, but not an effective ti	ne, at 12:01 a.m. on	the earlier of: (b)	The 90th day after the
DECEMBER 5TH ated	2019	 ·		
		15		
	ature of a member or author	$ \!$		