# LIGOOOIB32/

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)	
Certified Copies	_ Certificate:	s or Status
Special Instructions to	Filing Officer:	

Office Use Only



100293057691

12/12/16--01019--026 \*\*30.00



D. BRUCE NEC 13 2016

## **COVER LETTER**

	tion Section of Corporations	
SUBJECT:	White Hat Partners LLC Name of Limited Liability Company	
The enclosed Art	cles of Amendment and fee(s) are submitted for filing.	
Please return all	orrespondence concerning this matter to the following:	
	Patrick Sirmeyer Name of Person	
	White Hat Partners LLC Firm/Company	
	Z68 Ringwood Dr. Address	
	Winter Springs, FL 32708 City/State and Zip Code	
	Patricle Sirmeyer @ gmail. Com  E-mail address: (to be used for future annual report notification)	
For further infor	nation concerning this matter, please call:	
<u>Patric</u>	nation concerning this matter, please call:  Lack Signature  at (407) 721 - 4005 AFR  Area Code Daytime Telephone Number 777 AFR  Daytime Telephone Number 777 AFR	
	ck for the following amount:	ב כ
\$25.00 Filing	Fee \$\infty\$ \$30.00 Filing Fee & \$\subseteq\$ \$55.00 Filing Fee & \$\subseteq\$ \$60.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)  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 Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

White Hat A	orthers 2 ed Liability Company as i (A Florida Limited Liability	it now appears on our y Company)	records.)		
The Articles of Organization for this Limited Li Florida document number <u>L16000</u>	ability Company were 18321.	filed on 10/13	5/16	_ and assig	gned
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name of	the limited liability o	company here:			
The new name must be distinguishable and contain the w  Enter new principal offices address, if applicate the contain office address MUST BE A STREE	able:	mpany," the designation	n "LLC" or the abbr	eviation "L.L	.C."
Enter new mailing address, if applicable:			TALLAHAS	2016 DEC	ŋ
(Mailing address MAY BE A POST OFFICE)	<u>BOX)</u>	******	יייי בי רוו ייי	2 D	1
B. If amending the registered agent and/ registered agent and/or the new registered of		address on our re	ecords, enter th	<u>'</u>	of the new
Name of New Registered Agent:	Annal	ee Sirme	eyer		
New Registered Office Address:	268 Ri	Enter Florida street	address		
	winter sq	ings	, Florida <u>2</u>	278 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>	Name	Address	Type of Action
MGR	<u>Annalee Sirmeyer</u>	268 Ringwood D	nive 32708 XAdd
			☐ Remove
			☐ Change
			Add
			☐ Remove
		<del></del>	Add
			Remove
			☐ Change
			Add
			Remarke DEC Change 2
			Add Add
			Remove
			☐ Change
			☐ Add
			□ Remove
			□ Change

·						
	<del></del>			-		
					<del></del>	
		·			7.55	
<del> </del>					ECRET BEC	
					AAS	
					PEE.	1
			-		<del>-</del>	,
<del></del>			,		50 m 6	
				<del> </del>		<del></del>
fective date, if othe an effective date is listed, ote: If the date inserted to the compant's effective date.	ed in this block does	not meet the app	licable statutory f	(o) r more than 90 days a ling requirements,	ptional)	to 605.0
e: If the date inserte ument's effective da				ling requirements,	this date will not b	e listed a
record specifies The 90th day afte	a delayed effect r the record is f	ive date, but iled.	not an effectiv	e time, at 12:0	1 a.m. on the $\epsilon$	arlier (
ted						
		<del></del>	<u> </u>			
	2-7					
	Signature	e et a member or a	thorized representa	ive of a mamber		_

Page 3 of 3

Filing Fee: \$25.00