117000106126

. (Requestor's Name)	
((Address)	
	(Address)	
	City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
· ·	Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of S	Status
Special Instructions	to Filing Officer:	

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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 2, 2017

ADAM BERGMAN 1688 MERIDIAN AVE STE 504 MIAMI BCH, FL 33139

SUBJECT: HART TO HART INVESTMENTS LLC

Ref. Number: L17000106126

We have received your document for HART TO HART INVESTMENTS 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.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia I Simmons Regulatory Specialist II

Letter Number: 517A00011124

RECEIVED

SECREMENT OF INTERPRETATE

SECREMENT OF STATE

ALASSEE FLORIO

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HART TO HART INVESTMENTS, LLC		
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability C Florida document number $\frac{1.17000106126}{1.000106126}$	Company were tiled on MAY 12TH, 2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ited liability company here:	
The new name must be distinguishable and contain the words "I im	ited Liability Company," the designation "LLC" or	the abbreviation "L.I., C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		,
		,
B. If amending the registered agent and/or regis registered agent and/or the new registered office add	_	nter the name of the n
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	ła
	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. Thereby 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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AR	ADAM BERGMAN	1688 MERIDIAN AVE. STE 504	D Add
		MIAMI BEACH, FL 33139	■ Remove
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Tective date, if other than an effective date is listed, the date ofte: If the date inserted in the ocument's effective date on the	is block does no	t meet the applica	able statutory filir	(opt nore than 90 days afte g requirements, th	ional) er Hiing.) Pursuant to 605.0 is date will not be listed
e record specifies a dela The 90th day after the			t an effective	ime, at 12:01	a.m. on the earlie
nted MAY 19		2017	'	3	
			orized representative		

Page 3 of 3

Filing Fee: \$25.00