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STORTABLE SPECIALS
TALLAHASSEE, FLORIDA

DEC 0 6 2013 S. YOUN -

COVER LETTER

Division of Corporations			
SUBJECT: HOKAH MANAGEMENT GROUP 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:			
Vlena Jahrani kova Name of Person			
HL management groups ill			
8011 ABBO + AVR, ap1 1			
Mi City/State and Zip Code			
IN FO 3 ack @ gmoi/. com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
VEEN W Sadyum Kova at (305) GSP, 4893 Name of Person Area Code Daytime Telephone Number			
Enclosed is a check for the following amount:			
S25.00 Filing Fee S30.00 Filing Fee S4 Certificate of Status Certified Copy (additional copy is enclosed) S25.00 Filing Fee S4 Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certified Copy (additional copy is enclosed)			

MAILING ADDRESS:

. . .

Registration Section

TO:

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

The Articles of Organization for this Limited Liability Company were filed on $\frac{05/23/2017}{}$ and assigned Florida document number <u>L 17000114342</u> 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

___, Florida <u>__</u>

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
			Remove
			Change
			Remove
			Change
			Remove
			Change
			□ Remove
			☐ Change
			□ Remove
			Change
			Add
			Remove

). II amena	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Note: If t	date, if other than the date of filing: 11/01/2019 (optional) we 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) he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 's effective date on the Department of State's records.
	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 0th day after the record is filed.
Dated	11/01/2019 Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	Viena Su Fyani Kova Typed or printed name of signee

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Filing Fee: \$25.00