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(Requestor's Name) (Address)	700303834377
(Address) (City/State/Zip/Phone #)	09/29/1701012002 ** 25.00
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	17 1710
Special Instructions to Filing Officer:	FHED 17 OCT 23 PH 3: 45
Office Use Only	



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 2, 2017

RICK MELERO 250 N ORANGE AVE, STE 610 ORLANDO, FL 32801

SUBJECT: HIS CAPITAL GROUP TUSCANY, LLC Ref. Number: L17000115200

We have received your document for HIS CAPITAL GROUP TUSCANY, 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. These names are not available for one year from the date of administrative dissolution/revocation unless such entity provides the Department of State with an affidavit or letter releasing the name for use and affirming that they have no intention of reinstating.

An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate name must contain "CORPORATION", "CORP.", "INCORPORATED", or "INC.". Section 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a not-for-profit corporation. Please enter the alternate name in the space provided in number one of the application.

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

Octavia L Simmons Regulatory Specialist II

Letter Number: 517A00019853

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www.sunbiz.org

Division of Cornerations - P.O. BOX 6327 - Tallabasson Florida 32314

ARTICLES C	DF AMENDMENT
· ·	ТО
ARTICLES OI	FORGANIZATION
, ,	OF
HIS Capital Group Tuscany, LLC	L. C.
(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our records.) ited Liability Company)
The Articles of Organization for this Limited Liability Comp	any were filed on FL and assigned
Florida document number L17000115200	
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This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited l	liability company here:
KM =	
HIS Holdings LLC HIS CAPITAL GROUP The new name must be distinguishable and contain the words "Limited L	HOLDINGS UC
The new name must be distinguishable and contain the words. Annued it	hadding company, the designation fille of the abbreviation fille.
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS	
	· 23
Enter new mailing address, if applicable:	PR
-	ـــــــــــــــــــــــــــــــــــــ
(Mailing address MAY BE A POST OFFICE BOX)	
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	d office address on our records, <u>enter the name of the new</u>
registered agent and/or the new registered office address	<u>nere</u> :
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	. Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Age	ent:

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

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If amending Authorized Person(s) authorized to manage. <u>enter the title, name, and address of each person</u> being added or removed from our records:

i.

MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	Address	Type of Action
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Effective date, if other than the date of filing:	<u> </u>		_÷ _¦
Effective date, if other than the date of filing:(optional) If an effective date, if other than the date of filing:(optional) If an effective date is listed, the date must be specific and cannot be prior to date of filing requirements, this date will not be listed as the statutory filing requirements, this date will not be listed as the specific and the applicable statutory filing requirements, this date will not be listed as the specific and the applicable statutory filing requirements, this date will not be listed as the specific and cannot be prior to date of filing requirements. this date will not be listed as the specific and cannot be prior to date of filing requirements. The specific and cannot be prior to date of filing requirements. The specific and the specific and cannot be prior to date of filing requirements. The specific and cannot be prior to date of filing requirements. The specific and cannot be prior to date of filing requirements. The specific and cannot be prior to date of filing requirements. The specific and cannot be prior to date of filing requirements. The specific and cannot be prior to date of filing requirements. The specific and cannot be prior to date of filing requirements. The specific and cannot be prior to date of filing requirements. The specific and cannot be prior to date of filing requirements. The specific and cannot be prior to date of filing requirements. The specific and cannot be prior to date of filing requirements. The specific and cannot be prior to date of filing requirements. The specific and cannot be prior to date of filing requirements. The specific and cannot be prior to date of filing requirements. The specific and cannot be prior to date of filing requirements. The specific and cannot be prior to date of filing requirements. The specific and cannot be prior to date of filing requirements. The specific and cannot be prior to date of filing requirements. The specific and cannot be prior to date of filing requirements. The specific and cannot be		·	<u> </u>
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locument's effective date on the Department of State's records.	f an effective date is listed, the date must be <u>Note:</u> If the date inserted in this block locument's effective date on the Depa	specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to does not meet the applicable statutory filing requirements, this date will not be	605.0207 (3)(t listed as the

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Dated _____ 2017 Signature of a member or anthorized representative of a member Rick Melero Typed or printed name of signce

Page 3 of 3

Filing Fee: \$25.00