

L17000117131

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

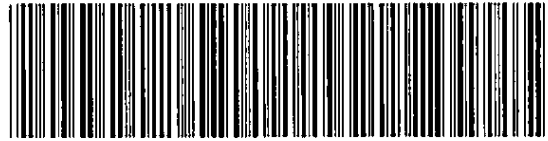
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400434522974

08/09/24--01010--003 \*\*25.00

08/09/24 11:53:35  
FILED

08/09/24

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Harbor Homes 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:

Judy Chou

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

1324 Chestwood Cv

\_\_\_\_\_  
Address

Lake Mary, FL 32746

\_\_\_\_\_  
City/State and Zip Code

judycrealestate@gmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Judy Chou

407 6080819  
at ( )

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32304-0327

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
1000 N. G St.  
Tallahassee, FL 32304

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Harbor Homes LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/26/2017 and assigned  
Florida document number L17000117131.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Hi Tea & Coffee, LLC

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:

1425 Tuskawilla Rd #173, Winter Springs FL 32708

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

1324 Chestwood Cv, Lake Mary, FL 32746

(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*

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 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**

[illegible]

2019  
FEB 20 10 50 AM  
FEB 20 10 50 AM

(If an effective 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)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated July / 29 / 2024

Inoly Choe  
Signature

Signature of a member or authorized representative of a member

Judy Chou

Typed or printed name of signee

**Filing Fee: \$25.00**