

(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



700307336567

01/09/18--01019--007 **25.00

B FIGUEROA FEB 0 6 2018



January 11, 2018

CECELIA RAMOS 230 SANDY HOOK LANE DELAND, FL 32724

SUBJECT: SANDY HOOK INVESTMENTS LLC

Ref. Number: L17000138674

We have received your document for SANDY HOOK 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.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Brittany M Figueroa Regulatory Specialist II Registration/Qualification Section

REOFNID

Letter Number: 818A00000684

COVER LETTER

TO:

Registration Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

SUBJECT:	NAY HOOM	K INVESTME	~75 << C
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	CECE	(1.4 RANOS	·
	5,2011	Name of Person	STARNIS ZCC
		Firm/Company	
	230 54	Address	Ln~ E
	DEKANA	City/State and Zip Code	4
		City/State and Zip Code	
	AFFCO X	to be used for future annual report notif	· · ·
For further information c	oncerning this matter, please e		icatini)
CECELI.	RAMOS	at (95 ×) 7 / 5 Area Code Daytimo	- 9955 :
Name o	f Person	Area Code Daytimo	Telephone Number
Enclosed is a check for th	ne 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 Fiting Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	ING ADDRESS:	STREET/COURI Registration Section	

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SANAY HOO	ok In	VESTME	~;s		
(Name of the Limited	Liability Compa A Florida Limited I	ny as it now appears on Liability Company)	our records.)		
The Articles of Organization for this Limited Lial	bility Company	were filed on <u>6/</u> 7 ×	26/201	7 and assign	ied
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	he limited liabi	ility company here:			
The new name must be distinguishable and contain the wor	rds "Limited Liabil	ity Company," the design	nation "LLC" or the ab	breviation "L.L.C	
Enter new principal offices address, if applical	ole:				-
(Principal office address MUST BE A STREET	ADDRESS)			<u> </u>	<u>-⊻:</u>
Enter new mailing address, if applicable:				JA 131	022 2027 2027 2027 2027
(Mailing address MAY BE A POST OFFICE B	<u>0X)</u>			**	To sale
B. If amending the registered agent and/or registered agent and/or the new registered offi	ce address here	**			the new
Name of New Registered Agent:	KAT	BANYA.	REGA	~	
New Registered Office Address:		Enter Elevidor	sense uddence	ACE	
	TAMA	City	Florida	3332 Zip Code	, <i>1</i> .
		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

<u>Title</u>	Name	Address	Type of Action
MGR	RAMOS, CECELIA	G. 230 SANGUMGOK LANG	□ Add
		DELAND, FL. 32724	Remove
			Change
MGR	KEMP, JOHNK	6. 230 SANATHOOK LANG	<u> </u>
		DELAND, FL. 32724	Remove
			Change
MGR	KATHERINE RÉG	ON 7710 BANYAN TERRACE	M _Add
		TAMARAC, FX ,33321	Remove
			Change
M6R	DARREN ROSS J.	2. 7515 N.W. 4155 STR€€	Add
		CORAL SPRINGS FL 33065	_ □ Remove
			Change
			□ Add
			_□ Remove
			SECRE
			Add
			_□ Remov e? 24 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
			☐ Change

No.	
	200
	<u> </u>
etive date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90. If the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records.	days after filing.) Pursuant to 605.02
	12:01 a.m. on the earlier
e 90th day after the record is filed.	
e 90th day after the record is filed.	5
e 90th day after the record is filed.	
ecord specifies a delayed effective date, but not an effective time, at the 90th day after the record is filed. d / . 26 . 20/8 Signature of a member or authorized representative of a member of a member of printed name of signee.	18 JAN 31 AM

Page 3 of 3

Filing Fee: \$25.00