

L17000190376

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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Hoplite Group, LLC
124 E. Miracle Strip Parkway Suite 402
Mary Esther, Florida 32569

30 September 2020

Subject: Hoplite Group Request Certified Articles of Organization

Dear Sir/Ma'am,

This letter is to request an amendment to our Articles of Organization along with a certified copy and a Certificate of Status for the entity named Hoplite Group, LLC. The document number is L17000190376. The document was filed with the Division of Corporations on Sept 8, 2017.

If you have any questions regarding this certified copy request, please contact me through email at angelos.koskinas@thehoplitegroup.com or via telephone at (203) – 998 - 1393.

Respectfully,



Angelos Koskinas
Operations Director
Hoplite Group, LLC

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Hoplite 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:

Angelos Koskinas

Name of Person

Hoplite Group, LLC

Firm/Company

124 East Miracle Strip Parkway, Suite 402

Address

Mary Esther, FL 32569

City/State and Zip Code

angelos.koskinas@hoplitegroup.com

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

For further information concerning this matter, please call:

Angelos Koskinas

Name of Person

at (203)

Area Code

998-1393

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Hoplite Group, 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 September 8, 2017 and assigned Florida document number L17000190376.

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:

Angelos Koskinas

New Registered Office Address:

Enter Florida street address

Florida

City

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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

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. 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 or more than 90 days after filing.) Pursuant to 605.0207 (1)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 _____

23 September 2020

Signature of a member of the public or a representative of a member

Typed or printed name of signer

Filing Fee: \$25.00