

L17000210355

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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S. WARREN

NOV 30 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 8, 2017

JONATHAN FAJARDO
1091 NW 127TH COURT
MIAMI, FL 33182

SUBJECT: HYBREED, LLC
Ref. Number: L17000210355

We have received your document for HYBREED, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return 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.

Stacey M Warren
Regulatory Specialist II

Letter Number: 717A00022715

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: HYBREED, 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:

Jonathan Fajardo

Name of Person

HYBREED, LLC

Firm/Company

1091 NW 127th CT

Address

Miami, FL 33182

City/State and Zip Code

triadite.usa@gmail.com

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

For further information concerning this matter, please call:

Jonathan Fajardo

786

333-7409

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 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**

HYBREED, 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 October 9, 2017 and assigned
Florida document number L17000210355.

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

_____, **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

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FLORIDA

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	Barreto, Steven	12700 SW 8th st Apt.202	<input type="checkbox"/> Add
		Miami, FL 33184	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Rendon, Jorge, L.	12538 NW 11th LN	<input type="checkbox"/> Add
		Miami, FL 33182	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	Fajardo, Jonathan	1091 NW 127th CT.	<input type="checkbox"/> Add
		Miami, FL 33182	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Jonathan, Fajardo	1091 NW 127th CT.	<input type="checkbox"/> Add
		Miami, FL 33182	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

jThis is the way we want it. We do not want any MGR's. And we do not have 2 Jonathan's only 1 Jonathan.

AMBR BARRETO, STEVEN/ AMBR FAJARDO, JONATHAN / AMBR RENDON, JORGE, L.

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 (3)(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 October 24, 2017



Signature of a member or authorized representative of a member

Jonathan Fajardo

Typed or printed name of signee

11/16/17

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!!! AMENDMENT HAS BEEN PAID FOR !!!