

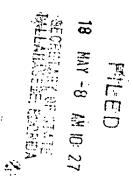
(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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FLORIDA DEPARTMENT OF STATE Division of Corporations

April 26, 2018

CLEITON CARDOSO 6965 PIAZZA GRANDE AVE, STE 206 ORLANDO, FL 32835

SUBJECT: HCC COMPANY LLC Ref. Number: L18000036944

We have received your document for HCC COMPANY 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 registered agent must sign accepting the designation.

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

Octavia L Simmons Regulatory Specialist III

Letter Number: 218A00008673

RECEIVED

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COVER LETTER

то:	Registration Se Division of Cor			
SUBJE	HCC COM	PANY LLC		
SUBJE			ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
	ı	CLEITON CARDOSO		
			Name of Person	
		DOMINIUM CONSULTI	NG SERVICES LLC	
			Firm/Company	
6965 PIAZZA GRANDE AVE SUIT 206				
			Address	
		ORLANDO, FL 32835		
			City/State and Zip Code	
		INFO@DOMINIUMCS.CO		
	•	E-mail address: (to be used for future annual report notific	cation)
For furth	ner information co	oncerning this matter, please co	all:	
ANA C	LARA PIMENTA		at () 374-2329 Area Code Daytime	
	Name of	f Person	Area Code Daytime	Telephone Number
Enclosed	d is a check for th	e 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

HCC COMPANY LLC			a is 6	
(Name of the Lim	ited Liability Compa (A Florida Limited)	any as it now appears on Liability Company)	our records.)	
The Articles of Organization for this Limited I	Liability Company	were filed on <u>02/09/2</u>	018 and Assigned	
Florida document number L18000036944	•		原金 基	
This amendment is submitted to amend the fol	lowing:		の27 27	
A. If amending name, enter the new name of	of the limited liab	oility company here:		
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designa	ation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if appli	cable:	8275 LOOKOUT PO	DINTE DRIVE	
(Principal office address MUST BE A STRE	ET ADDRESS)	WINDERMERE, FL	. 34786	
Enter new mailing address, if applicable:		8275 LOOKOUT POINTE DRIVE		
(Mailing address MAY BE A POST OFFICE	<u>SBOX)</u>	WINDERMERE, FL	. 34/80	
B. If amending the registered agent and registered agent and/or the new registered of			r records, enter the name of the nev	
Name of New Registered Agent:	DOMINIUM C	CONSULTING SERVIC	CES LLC	
New Registered Office Address:	6965 PIAZZA	GRANDE AVE SUIT 2	206	
		Enter Florida st	reet address	
	ORLANDO		, 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.

f Changing Registered Agent, <u>Signature of New Registered Agent</u>

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>	Type of Action
MGR	WALTER A NUNES JR	431 OPAL CT	Add
		ALTAMONTE SPRINGS, FL	■ Remove
		32714	□ Change
AMBR	ALESSANDRO R FERREIRA	8275 LOOKOUT POINTE DR	
		WINDERMERE, FL	Remove
		34786	■ Change
			Add
			□ Remove
			Change
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			A. T. C.
ffective date, if other than the can effective date is listed, the date must lote: If the date inserted in this blo ocument's effective date on the De	be specific and cannot be prior ck does not meet the applic	able statutory filing requiren	(optional) I days after filing.) Pursuant to 605.0207 ments, this date will not be listed as
e record specifies a delayed The 90th day after the reco		t an effective time, at	12:01 a.m. on the earlier of
ated	2018	<u> </u>	
		orized representative of a memb	

Page 3 of 3

Filing Fee: \$25.00