Division of Corporations **Electronic Filing Cover Sheet**

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HEL&MAR ENTERPRISES, LLC

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COVER LETTER

TO:	Registration Sec Division of Corp	ction porations		
eun ar c		R ENTERPRISES, LLC		
SUBJEC		Name of Limi	ited Liability Company	
		Amendment and fee(s) are sub- idence concerning this matter		
		Cheyenne Moseley		· ·
			Name of Person	
		Legalzoom.com, Inc.		2
			Funt/Company	· ·
		101 N. Brand Blvd., 11t	h Floor	· · · · · · · · · · · · · · · · · · ·
			Address	· · ·
		Glendale, CA 91203	•	ارر· ك
		marlen.prato@gmail.com	City/State and Zip Code	·
			to be used for future annual report	notification)
For furth	er iuformation co	incerning this matter, please ca	att:	
Cheyen	ne Moseley			38 ext. 9724
	Name of	Person	Area Code Da	ysime Telephone Number
			÷ *	
Enclosed	l is a check for th	e following amount:	•	
□ \$25.0	00 Filling Fec	□ \$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

Tallabassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clinton Building 2661 Executive Center Circle Tallahussee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HEL&MAR ENTERPRISES, LLC		
(Name of the Limited Liability Compu (A Flonda Limited)	nny us it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L18000150380</u>	were filed on 06/19/2018	and assigned
This amendment is submitted to amend the following:		,
A. If amending name, enter the new name of the limited liab	sility company here:	
The new name must be distinguishable and end with the words "Limited Liab	bility Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3577 SW 175 Ave.	
(Principal office uddress MUST BE A STREET ADDRESS)	Miramar, Florida 33029	
	3577 SW 175 Ave.	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Miramar, Florida 33029	
Praining uniness mar bit. A POST OF FICE DOZD		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	office address on our records, en	ن <u>د ter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street oddress	
	, Florida	Zip Code
	L <i>av</i> '.	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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			
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Marlen Prato (AMBR): 3577 SW 175 Ave., Miramar, Florida 33029	
Helen Lumpuy (AMBR): 3577 SW 175 Ave., Miramar, Florida 33029	
The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than	_ (optional) 90 days after
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