118000150784

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COVER LETTER

	Registration Sec Division of Corp			
SI:DIECT		OOPS, LLC		
SUBJEC	· :	Name of Limi	ted Liability Company	
The enclo	sed Articles of a	Amendment and fee(s) are sub-	nitted for filing.	
Please ret	urn all correspoi	ndence concerning this matter t	o the following:	
		DARNELL HANEY		
		- · ·	Name of Person	
		DHANEYHOOPS, LLC		
			Firm/Company	
		12367 CADLEY CIR		
			Address	
		JACKSONVILLE, FL 322	19	
			City/State and Zip Code	
		DHANEYHOOPS@GMAI		-
			o be used for future annual report notif	ication)
For furthe	er information co	oncerning this matter, please or	dl:	
DARNELL HANEY		407 956-0714 at ()		
	Name of	Person	Area Code Daytime	: Telephone Number
Enclosed	is a check for th	e following amount:		
\$25.0	0 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

(Name of the Limited Liability Company as it now a (A Florida Limited Liability Comp		
	ppears on our records.) any)	
The Articles of Organization for this Limited Liability Company were filed on 06/19/2018		and assigned
lorida document number L18000150784		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liability compa	ny here:	
he new name must be distinguishable and contain the words "Limited Liability Company."	the designation "LLC" or the abb	reviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)	<u>_</u>	€
	•	r Ça
		. 27
Inter new mailing address, if applicable:	• • •	
	- · · · · · · · · · · · · · · · · · · ·	
Mailing address MAY BE A POST OFFICE BOX)		<u>. </u>
		· · · · · · · · · · · · · · · · · · ·

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>	<u>Name</u>	Address	Type of Action
MGRM	DARNELL HANEY	12367 CADLEY CIRCLE	⊟ Add
		JACKSONVILLE, FL 32219	Pemove
		-	Change
MGRM	NURA A HANEY	12367 CADLEY CIRCLE	☐ Add
		JACKSONVILLE, FL 32219	■ Remove
			□ Change
			Add
			□ Remove
			☐ Change
			□ Add
			☐ Remove
			Change Add
			Remove
			tr' □ Change
			☐ Remove
			☐ Change

	LEASE CALL ME AT 407-	956-0714			
					
					
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tive date, if other than the (data of filing 66/2	6/2018	(option:	.1 \	
fective date is listed, the date must	be specific and cannot be prior	to date of filing or mon	than 90 days after tili	ng.) Pursuai	nt to 60:
If the date inserted in this blo tent's effective date on the De			equirements, this da	ate will not	be list
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Filing Fee: \$25.00