# 48000160942

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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#### **COVER LETTER**

	Registration Sec Division of Cor							
CIID IE		IOI.DINGS, LLC						
SUBJEC	· I :	Name of Limited Liability Company						
The encl	osed Articles of .	Amendment and fee(s) are sub	mitted for filing.					
Please re	turn all correspo	ndence concerning this matter	to the following:					
		Joy Siegrist						
			Name of Person					
			Firm/Company					
		230 Linger Lane						
			Address					
		Sun City Center, FL 33572	3					
		City/State and Zip Code jsiegrist411@yahoo.com						
		E-mail address: (	to be used for future annual report noti	fication)				
For furth	er information co	oncerning this matter, please co	all:					
Joy Sieg	grist		914 260-4411 at ()					
	Name of	Person	Area Code Daytim	e Telephone Number				
Enclosed	l is a check for th	e following amount:						
\$25,0	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



February 25, 2019

JOY SIEGRIST 230 LINGER LANE SUN CITY CENTER, FL 33573

SUBJECT: HELENE HOLDINGS, LLC

Ref. Number: L18000160942

We have received your document for HELENE HOLDINGS, 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): sending buck!

The registered agent must sign accepting the designation.

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) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 219A00003942

RECEIVED

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HELENE HOLDINGS, LLC		
( <u>Name of the Lim</u>	ited Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)
The Articles of Organization for this Limited I	Liability Company were filed on	and assigned
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name	of the limited liability company h	ere:
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 appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	BOX)	- To 15
		ंऽ
B. If amending the registered agent and	2	n our records, enter the name of the n
registered agent and/or the new registered (	office address here:	· · · · · · · · · · · · · · · · · · ·
Name of New Registered Agent:	Sarah A. Hughey	
New Registered Office Address:	230 Linger Ln	
	Enter Flo	orida street address
	Sun City Center	, Florida <sup>33573</sup>
	Сну	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.

16 Changing Registered Agent. Jignature 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
AR	Sarah A. Hughey	230 LINGER LANE SUN CITY CENTER, FL 33573	Add
			☐ Remove
			Change
			Add
			□ Remove
			□ Change
			Add
			□ Remove
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Note:	tive date, if other than the date of filing:  [Coptional]  [Fective 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 605.02  [If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed and the content's effective date on the Department of State's records.
the re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.
Dated	2/13/2019.
	Signification of
	Signature of a member or authorized representative of a member
	$\mathcal{L}$

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Filing Fee: \$25.00