

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : ASLAN TAX SERVICES INC
Account Number : 120140000082
Phone : (305)644-9144
Fax Number : (786)477-5807

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ernesto@aslan-tax-service.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
HII DEVELOPERS 12, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

SECRETARY OF STATE
TALLAHASSEE, FL

2018 OCT 29 AM 9:30

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Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

850-617-6383

TO: Registration Section
Division of Corporations

SUBJECT: HH Developers 12 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:

Ernesto Sanchez

Name of Person

Aslan Affiliates LLC

Firm Company

762 SW 18 Avenue

Address

Miami, FL 33135

City/State and Zip Code

ernesto@aslan-taxservice.com

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

For further information concerning this matter, please call:

Ernesto Sanchez

786 200-6141

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

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850-617-6383

H18 0003118 213

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

850-617-6383

HH Developers 12 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 _____ and assigned
Florida document number L18000163119

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

762 SW 18 Avenue

Miami, FL 33135

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

762 SW 18 Avenue

Miami, FL 33135

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

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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ALLAHUSSEIN FL

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Ariel Damian Szaiber	762 SW 18 Avenue	☒ Add
		Miami, FL 33135	☐ Remove
			☐ Change
AMBR	III Realty Group LLC	2601 NE 212 Terrace Unit 107	☐ Add
		Miami, FL 33135	☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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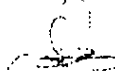
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 850-617-6383

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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 29, 2018

 _____
Signature of a member or authorized representative of a member

Ariel Damian Szrajber

Typed or printed name of signer

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DEPARTMENT OF STATE

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