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PEPAREMENT OF MEAN INVISION OF CORPORATIONS

D SCOTT

JUN - 5 2019

· · ·	
C	COVER LETTER
TO: Registration Section Division of Corporations	\$
SUBJECT: HTGH CLASS Name of Limit	HUSTLE LLC ed Liability Company
The enclosed Articles of Amendment and fee(s) are subr	nitted for filing.
Please return all correspondence concerning this matter to	
Jotto	A EDOWARD Name of Person
HIGH	CLASS HOSTLE LLC
2313 (pland way
Tourt	ASSEE FL 32311 2 2 3
HUSTLE HE	SHCLASS Late @ amail. Com
For further information concerning this matter, please ca	
JOHN A EDOUARI Name of Person	at (850) 728-0174 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
S25.00 Filing Fee □ S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & \$60.00 Filing Fee, Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) (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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ARTICI	LES OF AMENDMENT TO
ARTICL	ES OF ORGANIZATION
	OF
HIGH CLAS	SS HUSTLE LLC bility Company as it now appears on our records.)
(A Fib	rida Limited Liability Company)
The Articles of Organization for this Limited Liability	y Company were filed on 10 22 18 and assigned
Florida document number <u>L18000247</u>	182
This amendment is submitted to amend the following	
A. If amending name, enter the new name of the	imited liability company here:
HUSTLE HIGH	CLASS LLC
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 applicable:	1882 CAPITAL CTRULE-NI
(Principal office address MUST BE A STREET AD	DRESS SUFT 102
	TALLAHASSEE, FL 32308
	n Row mar ??
Enter new mailing address, if applicable:	TOUR DUNCESCE EL 20214
(Mailing address MAY BE A POST OFFICE BOX)	TALLAHASSEE, FL 32314

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:	ROSTER, Shono	0N
New Registered Office Address:	1882 CAPITAL Enter Florida street of	CTRCLE NE, SUT
	TALLAMASSEE	_, Florida <u>FL 3231)</u> 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.

inging Registered Agent, Signature of New Registered Agent

Page 1 of 3

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

1

MGR = Ma AMBR = Au	nager thorized Memb	er					
<u>Title</u>	<u>Name</u>			Address			Type of Action
MGR	John	A Edo	upard	PO Tour	BOX	7273	DBT Add
				TOLLAY	HOSSEE	., FL 322	34 Remove
		<u> </u>					O Add
							Remove
						·	Add
							Add
			_				□ Change □ Add
							🗆 Remove 🗆 Change
			_				🖸 Add 🗆 Remove
							Change

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

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<u> </u>	
<u>.</u>	
	<u></u> <u>N</u>
fective date, if other than the date of filing:	(optional)
in effective date is listed, the date must be specific and c	annot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207
ote: If the date inserted in this block does not me	et the applicable statutory filing requirements, this date will not be listed as
ocument's effective date on the Department of Sta	ate's records.
e record specifies a delayed effective da	te, but not an effective time, at 12:01 a.m. on the earlier of
The 90th day after the record is filed.	
ated 06/05/19	
$d_{\text{nted}} = \frac{06/05/19}{06/05/19}$	· //
\sim	<i>f_d</i>
Signature of a m	ember or authorized representative of a member
	France
	Typed or printed name of signee
	Page 3 of 3
	Page 3 of 3 Filing Fee: \$25.00