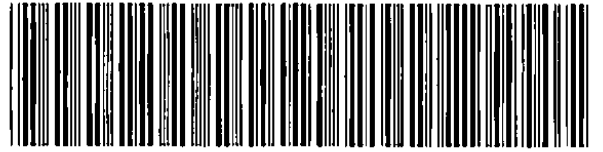


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JUN - 5 2019

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HIGH CLASS HUSTLE 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:

JOHN A EDUARDO
Name of Person

HIGH CLASS HUSTLE LLC
Firm/Company

2313 Upland way
Address

TALLAHASSEE FL 32311
City/State and Zip Code

HUSTLEHIGHCLASS@GMAIL.COM
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

JOHN A EDUARDO at (850) 728-0174
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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

HIGH CLASS HUSTLE 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 10/22/18 and assigned Florida document number L18000247482

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited 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:

(Principal office address MUST BE A STREET ADDRESS)

1882 CAPITAL CIRCLE NE
SUITE 102
TALLAHASSEE, FL 32308

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO BOX 7273
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, Shannon

New Registered Office Address:

1882 CAPITAL CIRCLE NE, SUITE
Enter Florida street address

TALLAHASSEE, Florida FL 32311
City 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.

Shannon Roster
If Changing Registered Agent, Signature of New Registered Agent

