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COVER LETTER

TO: Registration S Division of Co			
Division of Corporations Hawkeye Traders. LLC SUBJECT: 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: Michael G. Candiotti, Esq. Name of Person Latham Luna Eden & Beaudine, LLP Firm/Company 111 N. Magnotia Avc. Suite 1400 Address Orlando. Florida 32801 City/State and Zip Code meandiotti@lathamluna.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Michael G. Candietti, Esq. Name of Person Name of Person Daytime Telephone Number			
		-	
	Name of Limited Liability Company of Amendment and fee(s) are submitted for filing. spondence concerning this matter to the following: Michael G. Candiotti, Esq. Name of Person Latham Luna Eden & Beaudine, LLP Firm/Company 111 N. Magnolia Ave. Suite 1400 Address Orlando, Florida 32801 City/State and Zip Code meandiotti@lathamluna.com E-mail address: (to be used for future annual report notification) in concerning this matter, please call: Esq. e of Person at (
		Name of Person	
	Latham Luna Eden & Bea	oudine, LLP	
		Firm/Company	
	111 N. Magnolia Ave. Sui	ite 1400	
		Address	
	Orlando, Florida 32801		
	mcandiotti@lathamluna.com	and fee(s) are submitted for filing. erning this matter to the following: G. Candiotti, Esq. Name of Person Luna Eden & Beaudine, LLP Firm/Company lagnolia Ave. Suite 1400 Address Florida 32801 City/State and Zip Code i@lathamluna.com E-mail address: (to be used for future annual report notification) s matter, please call: at (407 481-5800 Area Code Daytime Telephone Number mount: Filing Fee & \$\Bigsim \$55.00 \text{ Filing Fee & \$\Bigsim \$60.00 \text{ Filing Fee},}	
	•		cation)
For further information of	concerning this matter, please ca	all:	
Michael G. Candiotti, E.	sq.	at (
Name o	of Person	Area Code Daytime	ime Telephone Number S60,00 Filing Fee, Certificate of Status & Certified Copy
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

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

DocuSign Envelope ID: DCB5F97F-81C4-4009-AAF0-E0791321BCFE ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hawkeye Traders LLC		
(Name of the Limited	d Liability Company as it now appears on our reco A Florida Limited Liability Company)	ords.)
The Articles of Organization for this Limited Lia	bility Company were filed on 12/20/2018	and assigned
Florida document number L18000293271	·	
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of (the limited liability company here:	
The new name must be distinguishable and contain the woo	rds "Limited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	
Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE B	<u> </u>	
		>> 2019 >> 5EC
		- R
If amending the registered agent and/or egistered agent and/or the new registered offi	r registered office address on our recor	rds, enter the hame of the
egistered agent and/or the new registered orn	ce audress nere.	식욕 💂 🔟
Name of New Designand Assets		Sa to U
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street add	
	Emer r torida street add	ress
	Ciry	Florida Zip Code
	City	zip Couc

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

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Randall Lindsey	10223 Billingham Drive	□ Add
		Charlotte, NC 28269	■ Remove
			Change
			Remove
			☐ Change
			Add
			Remove
			Change
			
			Remove
			Change
<u>.</u>			
		-	Remove
			☐ Change
			□ Remove
			Change

				
 				
				
				
				
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fective date, if other than the da n effective date is listed, the date must be te: If the date inserted in this block	specific and cannot be prior	to date of filing or more	(optional) than 90 days after filing.) Pursuan	nt to 605.0207 be listed as t
cument's effective date on the Depa			1	
record specifies a delayed e The 90th day after the record	ffective date, but not d is filed.	t an effective tim	e, at 12:01 a.m. on the	earlier of
	2010			
November 6th	2019			
DocuSigned by:		<u> </u>		
DocuSigned by:	nature of a member or autho	rized representative of	a member	_

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