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(Re	equestor's Name)		
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COVER LETTER

-TO: Registration Section Division of Corporation	
SUBJECT:	Haines City Appliance Luc Name of Limited Liability Company
The enclosed Articles of Art	nendment and fee(s) are submitted for filing.
Please return all corresponde	ence concerning this matter to the following:
	Felio Collado Name of Person
	Haines City Appliance Luc
	35910 US-27 Address
-	Haines City FC 33844 City/State and Zip Code Felio Collado Qyahoo . Com E-mail address: (to be used for tuture annual report notification)
For further information conc	terning this matter, please call:
Felio Name of Pe	COLLADO at (40) 509-570 O Area Code Daytime Telephone Number
Enclosed is a check for the for the formula \$25.00 Filing Fee	Certificate of Status □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate Of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
<u>Mailing Address:</u> Registration Sec	Street Address: Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Haines city	A-pplismice hills.
(Name of the Limited Liability Compar (A Florida Limited L	is as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company of Florida document number <u>L[9001563</u> 36	, , , , , , , , , , , , , , , , , , ,
Florida document number <u>C (9000) 303</u> 50	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili	ty 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)	
Enter new mailing address, if applicable:	Felio Collado
(Mailing address MAY BE A POST OFFICE BOX)	3200 Hawks Ridge D
	Kissimmee, FL 33844
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ddress on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
New Registered Agent's Signature, if changing Registered Agent:	zip Cow
is a regimered regent a digitation of changing registered register.	

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. Thereby confirm that the limited liability

company has been notified in writing of this change.

If Changing Registered Agent, Signature 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 2020 HAY -4 PH 2: 51	Type of Action
MGR	Ramon Vazquez	2750 WARMOUTH - DEVCH KISSIMMER, FL 347	dv JAdd 44 Remove
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D. If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
_	From corporation.	
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(If an effe Note:	ve date, if other than the date of filing: 0430 2020 (optional) retive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ent's effective date on the Department of State's records.	to 605,0207 (3) be listed as the
If the record record is file	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th dayed.	y after the
Dated ₋	April 30 . 2020	
	Signature of a member or authorized representative of a member	_
	Felio Collado	<u> </u>

Filing Fee: \$25.00