Division of Corporations Electronic Filing Cover Sheet

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(((H190002239193)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LARSON ACCOUNTING AND CONSULTING SERVICES LLC

Account Number : I20160000067

Phone : (407)370-3686

Fax Number

: (407)370-3120

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

Summer + @ langumacc. com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HNH RENTALS LLC

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$25.00

JUL 26 2019

A. LUNT

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Help

## **COVER LETTER**

TO: Registration Sec Division of Corp					
HNH RENT	TALS LLC				
SUBJECT:	Name of Limit	ted Liability Company	<del></del>		
The enclosed Articles of a	Amendment and fee(s) are subn	nitted for filing.			
Please return all correspon	ndence concerning this matter t	o the following:			
	CAROLINE G LARSON				
		Name of Person			
	LARSON ACCOUNTING	GROUP			
		Fim/Company			
	7901 KINGSPOINTE PKY	VY STE 17			
		Address		,	
	ORLANDO, FL 32819		62 ) Tig	19 JUL 25	
		City/State and Zip Code		. 2	.11
	support@larsonacc.com		indian's	, <u>(</u>	1
		to be used for future annual report notifi	reaction)	<del>2</del> <del>2</del>	7 T
For further information of	oncerning this matter, please or	all;	ក់ខ្ 3.ជ	<u>ن</u> ب	
CAROLINE G LARSO	N	407 3703686	354	ျှသ	
Name o	of Person		: Telephone Number		
Enclosed is a check for the	he following amount:				
\$25.00 Filing Fee	S30.00 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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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HNH RENTALS LLC			
(Name of the Limit	led Liability Comp (A Florida Limited	any as it now appears on our recort Liability Company)	<u>s.</u> )
The Articles of Organization for this Limited L Florida document number L19000157320	iability Compan	y were filed on <u>06/13/2019</u>	and assigned
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited lia	bility company here:	
N/A			
The new name must be distinguishable and contain the	words "Limited Liab	oility Company." the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applie	rable:	N/A	
(Principal office address MUST BE A STREE			
Enter new mailing address, if applicable:		N/A	19
(Mailing address MAY BE A POST OFFICE BOX)			
			25
			10 <b>2</b> 7
B. If amending the registered agent and registered agent and/or the new registered of	Vor registered office address he	office address on our record ere:	is, enter the name of the new-
Name of New Registered Agent:	N/A		·
New Registered Office Address:		Enter Florida street addre	est.
		. <b>F</b>	lorida
		Clty	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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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>	Name	Address	Type of Action
MGR	NATALIA ROMANELLI MOURAO	14803 BAHAMA SWALLOW BLVD	
		WINTER GARDEN, FL 34787	☐ Remove
			☐ Change
			☐ Remove
			☐ Change
			D'Add 5
			Change PH 2
			☐ Add; Co
			Change
			□ Add
			☐ Remove
			C Change
			☐ Remove
			☐ Change

			JUL 25
			R
Effective date, if other than the (If an effective date is listed, the date in Note; If the date inserted in this document's effective date on the	ust be specific and cannot be prior to date o block does not meet the applicable stat	of filing or more than 90 days after tutory filing requirements, thi	r [Hing.) Pursuant to 605.0207 (3)(b)
the record specifies a delay	ed effective date, but not an e ecord is filed.	ffective time, at 12:01	a.m. on the earlier of:
) The 90th day after the re			

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