## L19000208336

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## **COVER LETTER**

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	porations			
	HYFYN LLC.		. ,	
SUBJECT:				
,	Name of Lim	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
•	-	<b>.</b>		
	SANDRA PARDINA			
		Name of Person	<u></u> _	
	CRE HOLDINGS LLC			
		Firm/Company	<u></u>	
	301 YAMATO ROAD - SI	UITE 1200		
		Address		
	BOCA RATON, FL 33431			
	SANDRAPARDINA@HO	City/State and Zip Code FMAIL.COM		
	E-mail address: (	to be used for future annual :	report notificatio	n)
For further information c	oncerning this matter, please c	all:		
SANDRA PARDINA		561	292-5517	
Name o	f Person	at () Area Code	Daytime Telep	phone Number
Enclosed is a check for th	ne following amount:			
<b>■</b> \$25.00 Filing Fee	□ \$30.00 Filing Fee &	□ \$55.00 Filing Fee &	2,	□ \$60.00 Filing Fee,
	Certificate of Status	Certified Copy (additional copy is encl		Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Ad		
Registration S Division of C	·	<del>-</del>	ition Section n of Corporat	ione
P.O. Box 632			ror Corporati itre of Tallah	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

**HYFYN LLC** (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) and assigned The Articles of Organization for this Limited Liability Company were filed on \_\_\_ L19000208336 Florida document number \_\_\_ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: 301 YAMATO ROAD - SUITE 1200 (Mailing address MAY BE A POST OFFICE BOX) BOCA RATON, FL 33431 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: 301 YAMATO ROAD - SUITE 1200 New Registered Office Address: Enter Florida street address BOCA RATON

## 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.

City

If Changing Registered Agent. Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person\_being added or removed from our records</u>:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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ctive date, if other t	than the date of filing: (optional)
effective date is listed, the e: If the date inserted	e date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 in this block does not meet the applicable statutory filing requirements, this date will not be listed
iment's effective date	on the Department of State's records.
	d effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t
filed.	
JUNE 29	2020
ed	··
	_ •
	Signature of a member or authorized representative of a member

ET: E 635.00