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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ACCOUNT BOOKKEEPING CORP

Account Number : I20120000055 Phone : (407)898-1757 Fax Number : (407)897-5336

2019 DEC

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

## LLC AMND/RESTATE/CORRECT OR M/MG RESEGN HOREB LLC

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Page: 3 12/10/2019

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## **COVER LETTER**

Division of Corp			•
SUBJECT: HOREB LL			<b>7</b> 0,
sommer.	Name of Limi	ted Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub-	nitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	SUGEY DIAZ		
		Name of Person	
	ACCOUNT BOOKKEEPI	NG CORP	
		Firm/Company	<del></del>
	5301 CONROY ROAD SU	ЛТЕ 140	
		Address	
	ORLANDO, FLORIDA 32	2811	
		City/State and Zip Code	
	BOOKKEEPING@ABKCC	ORP.COM to be used for future annual report no:	· Destion :
	·		incadoky
	oncerning this matter, please or		
SUGEY DIAZ		407 8981757 at ()	
Name o	f Person	Area Code Daytin	ie Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55,00 Filing Fee & Certified Copy (additional copy is enclosed)	© \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed
Mailing Addres	<u>.5:</u>	Street Address:	

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

Page: 4 12/10/2019 04:55 PM TO:18506176383 FROM:5612934213

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Н	$\bigcap \mathbb{R}$	FR	ī	I	$\Gamma$

(Name of the Limited Liability Company as it now appears on our regards. DEC 10 P 1: 20

(A Florida Limited L	iability Company)
The Articles of Organization for this Limited Liability Company Florida document number 1.19000267108	were filed on 10/24/2019 SECRETARY OF STATE
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words "Limited Liability of the new name must be distinguishable and contain the words of the new name must be distinguishable and contain the new name must be distinguishable and contai	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:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:  Name of New Registered Agent:	iddress on our records, <u>enter the name of the new registered</u>
New Registered Office Address:	Enter Florida street address
	Florida
	, Florida City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is
If Cha	nging 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>	Name	Address	Type of Action
AMBR	TATIANA YANES	11831 IMAGINARY WAY	
	<b></b>	ORLANDO, PL 32832	□Remove
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Page: 6 12/10/2019 04:55 PM TO:18506176383 FROM:5612934213

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record specifies a delayed is filed.	ed effective date, bi	u: not an effective	ime, at 12:01 a.m. (	on the earlier of: (b)	The 90th day after
DECEMBER, 06		2019	$\gamma$ .		
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