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Special Instructions to	Filing Officer:	
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Office Use Only



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NOV 23 2021 I ALBRITTON COVERTELLER

TO:

P.O. Box 6327

Tallahassee, FL 32314

TO: Registration Division of C			
	ili sietities	.110	
SUBJECT:	Name of Limite	ed Liability Company	
The enclosed Articles	of Amendment and fee(s) are subm	itted for filing.	
Please return all corres	spondence concerning this matter to	the following:	
	- Dret J	Name of Person	
		Firm/Company	
	2929 River	view Dr Address	
	FLC 15136 F-mail address: (to	City/State and Zip Code OUT 10017. CCM be used for future annual report noti	fication)
For further information	n concerning this matter, please cal	II:	
Dret J Nam	C) YYYSC ~ (e of Person	at (3)1-) 436-5 Area Code Daytim	e Telephone Number
Enclosed is a check for	or the following amount:		
\$25,00 Filing Fee	☐ \$30.00 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)
<u>Mailing Add</u> Registratio		Street Address: Registration Se	ection
_	f Corporations	Division of Con	rporations
P.O. Box 6	5327	The Centre of T	l'allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 1, 2021

BRET JOHNSON 2929 RIVERVIEW DR MELBOURNE, FL 32901

SUBJECT: HIPPIETITTIES LLC Ref. Number: L20000050654

We have received your document for HIPPIETITTIES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 521A00026503

Irene Albritton
Regulatory Specialist III

www.sunbiz.org

TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hippictittics LLC	
(Name of the Limited Liability Company as it now a (A Florida Limited Liability Comp	appears on our records.) xany)
The Articles of Organization for this Limited Liability Company were filed of Florida document number <u>し入いののらいもらり</u> .	on 7-13-70 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compand The new name must be distinguishable and contain the words "Limited Liability Company."	
The new name must be distinguishable and contain the words "Limited Liability 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)	Ó
B. If amending the registered agent and/or registered office address on agent and/or the new registered office address here:	our records, <u>enter the name of the new regi</u>
Name of New Registered Agent:	
New Registered Office Address: Ent	er Florida street address
	, Florida Zip Code
City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

1 1

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply will 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 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
			□Add
			□Remove
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			□ Add
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			□Change
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Note: If	e date, if other than the date of filing:
record d is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after d.
Dated _	October 1 . 7th.
	Signature of a member or authorized representative of a member
	Brot Johnson
	1 1/07 (1UNYI SUV)