(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.
J. HORNE MAR 17 2023

Office Use Only



200403907572

3

2023 HAR 16 PM 2: 40

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Haut Development LLC	'
Please Debit I20000000257 For: 25	
Thank you Seth Neeley	
1	
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
1401	Fictitious Search
Sty/	Fictitious Owner Search
Signature	Vehicle Search
	Driving Record
Descripted how	UCC 1 or 3 File
Requested by:	UCC 11 Search
Name Date Time	UCC 11 Search UCC 11 Retrieval
Walk-In Will Pick Up	Courier

COVER LETTER

TO:

TO:	Registration So Division of Co			
cum ic		VELOPMENT LLC		
SUBJE	UI;	Name of Lim	ited Liability Company	
The encl	e return all correspondence concerning this matter to the following: DIEGO BESGA Name of Person Firm/Company 20801 BISCAYNE BOULEVARD, SUITE 403 Address AVENTURA, FL 33180 City/State and Zip Code diego@hautdv.us E-mail address: (to be used for future annual report notification) auther information concerning this matter, please call:			
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		DIEGO BESGA		
			Name of Person	
			Firm/Company	
		20801 BISCAYNE BOUL	EVARD, SUITE 403	
			Address	
		AVENTURA, FL 33180		
			City/State and Zip Code	
		= **		
For furth	er information o		•	mication)
	BESGA	G ,,	305 443-7211	
	Name o	f Person	at () Area Code Dayti	me Telephone Number
Enclosed	l is a check for th	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 Solvision of Control P.O. Box 632	Section Corporations 27	Street Address: Registration S Division of Co The Centre of 2415 N. Monr	orporations

Tallahassee, FL 32303

(?)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 HAR 16 AH 10: 15 SECRETARY 1: TALLARMOUSEL1

HAUT DEVELOPMENT LLC

(Name of the Limited Liability Company as It now annears on our records.)
(A Florida Limited Liability Company)

				•
s amendment is submitted to amend the following:				
If amending name, enter the new name of the limited	I liability company here:			
ND DEVELOPMENT TEAM LLC	. •			
new name must be distinguishable and contain the words "Limited	Linbility Company," the designa	tion "LLC" or the ab	breviation "L.L.C	3.7
ter new principal offices address, if applicable:		<u>. </u>		^^,
incipal office address MUST BE A STREET ADDRES	<u> </u>			· ·
				<u> </u>
ter new mailing address, if applicable:			2 1 2	/. •
ailing address MAY BE A POST OFFICE BOX)				<u> </u>
	•		<u> </u>	
nt and/or the new registered office address here: Name of New Registered Agent:				, , ,
Maile of the Registered Figure.	•	•	•	
	2.363.0		١.	
New Registered Office Address:	Enter Florida ste	ret address ?	• • •	
		cet address	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	Enter Florida str City		Zip Code	
	Enter Florida str City		Zip Code	

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

Title	Name		Address	Type of Action
MGR	ADRIAN BOSSI		20801 BISCAYNE BOULEVARD	BAdd
•			SUITE 403	□Remove
			AVENTURA, FL 33180	Change
· 				OAdd
				Change
			·	DAdd :
		,		□Remove
			Tought.	□ Change
				Remove
				□Change
·;····································	. ————		· · · · · · · · · · · · · · · · · · ·	□Remove
. ; 				□ Change
				Remove
•	<i></i>			Change

							
							
		_		· · · · · · · · · · · · · · · · · · ·			
				<u></u>			
÷						-	
٠							
			·	·- <u>-</u> -		· · ·	
				·			
	•			· · · · · · · · · · · · · · · · · · ·			
	<u> </u>		· ·				
			•		•	,	-
							
							
		· · · · · · · · · · · · · · · · · · ·		<u>. </u>		_	
					 .	•	
		• • • • • • • • • • • • • • • • • • • •	•			Section 1	
iote:	tive date, if other than the fective date is listed, the date mu. If the date mu. If the date mu. If the date continued in this beneat's effective date on the ford specifies a delayed effective.	lock does not meet the Department of State's	ne applicable sta records.	tutory filing require	ments; this c	lâte will not be	listed as the
reco	iled.	•	٠.	•			•
. • _		001	23			•	
is fi	MARCH 9	202		- 157		, ,,,	-, ·
is fi	MARCH 9					. /t/	*, '
record is fi	MARCH 9	Signature of a member		presentative of a men	ber .	·. /e	•

Filing Fee: \$25.00