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2020 SEP 10 PH 3: 05

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COVER LETTER

TO:

	tration Second			
41 SUBJECT:	HF LLC			
SUBJECT: _	_	Name of Lim	ited Liability Company	
The enclosed A	articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return al	l correspo	ndence concerning this matter	to the following:	
		Joseph Eric Williams		
			Name of Person	
		4HF LLC		283
		8067 Echo Springs rd	Firm/Company	2023 SEP 10 FH 3: 05
		·	Address	D R C
		Jacksonville, FL 32256		3: 0
		4hfvibes@gmail.com	City/State and Zip Code	35
For further info	ormation co	E-mail address: (oncerning this matter, please c	to be used for future annual report not all:	ification)
Joseph Eric W	illiams		904 874-3511 at ()	
	Name of	f Person		ne Telephone Number
Enclosed is a c	heck for th	ne following amount:		
□ \$25.00 Fili	ing 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)
	ng Addres stration S		Street Address: Registration Se	ection
Divis	sion of C	orporations	Division of Co	rporations
	Box 632	7 FL 32314	The Centre of	
rana	massee, f	L 32314	2413 N. MONTO	be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

4HF LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.)	
(i i i i i i i i i i i i i i i i i i i		
he Articles of Organization for this Limited Liability Company	were filed on 17 AUG 2020	and assigned
lorida document number 85-2745784		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liab	ility company here:	
HF Vibes LLC		
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4651 Salisbury road, Suite 400	
Principal office address MUST BE A STREET ADDRESS)	Jacksonville, FL 32256	
		2
		378
Inter new mailing address, if applicable:	4651 Salisbury road, Suite 400	SEF
•	Jacksonville, FL 32256	7 6
Mailing address MAY BE A POST OFFICE BOX)	(1)	P 11.
	r	<u>ာ</u> ကြွေး
3. If amending the registered agent and/or registered office a		
gent and/or the new registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter thes	name of the new regi
Name of New Registered Agent:		
Traing of the meginered rigent.		
New Registered Office Address:	Enter Florida street address	
	emier r ioriaa sireei address	
	Florida	
	City	Zin 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 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>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□ Change
			□Add
			Remove Change Add
			□ Add □ Ad
			_
			🖸 Add
			Remove
			□ Change
			DAdd
			Remove
			□Change
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			□Remove
			□ Change

If amending any other information, enter change(s) here: (Attach	·	
		
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Effective date, if other than the date of filing:	(optio	onal)
Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be prior to date of fil Note: If the date inserted in this block does not meet the applicable statute	ling or more than 90 days after ory filing requirements, this	filing.) Pursuant to 605.020 date will not be listed as
document's effective date on the Department of State's records.		
e record specifies a delayed effective date, but not an effective time, at 12:0 rd is filed.)1 a.m. on the earlier of: (b)	The 90th day after the
Oated 6th day of September 2020		
Signature of a member or authorized repres		

Typed or printed name of signee