

L2C 0003319C1

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

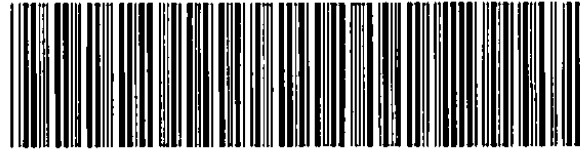
(Business Entity Name)

(Document Number)

d Copies _____ Certificates of Status _____

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12/01/20--01016--030 **25.00

FILED
2020 DEC -1 AM 7:54
SECRETARY OF STATE

L.A.
1/14/21

Registration Section
Division of Corporations

ET: HATO MAR LLC
Name of Limited Liability Company

osed Articles of Amendment and fee(s) are submitted for filing.

turn all correspondence concerning this matter to the following:

Egliaa Gomez

Name of Person

WD BUSINESS CONSULTANTS LLC

Firm/Company

1555 BONAVENTURE BLVD120

Address

WESTON, FL 33326

City/State and Zip Code

egliana.gomez@gmail.com

E-mail address: (to be used for future annual report notification)

er information concerning this matter, please call:

Gomez 954 4532295
at ()
Name of Person Area Code Daytime Telephone Number

is a check for the following amount:

☐ \$0.00 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)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**TO
ARTICLES OF ORGANIZATION
OF**

HATO MAR LLC

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

Articles of Organization for this Limited Liability Company were filed on 10/20/2020 and assigned document number L20000331901.

Amendment is submitted to amend the following:

Changing name, enter the new name of the limited liability company here:

Name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

New principal offices address, if applicable:

Principal office address MUST BE A STREET ADDRESS

New mailing address, if applicable:

Mailing address MAY BE A POST OFFICE BOX

Changing 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:

New Registered Office Address:

Enter Florida street address

_____, **Florida**
City Zip Code

Registered Agent's Signature, if changing Registered Agent:

I 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 understand the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is 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

ved from our records:

Manager
= Authorized Member

<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
BETHENCOURT, HECTOR R	AV. PPAL EDF CENTRO SOLDER LOC. 8351	<input type="checkbox"/> Add
	VALENCIA, EDO CARABOBO, VE 02003	<input checked="" type="checkbox"/> Remove
		<input type="checkbox"/> Change
FERRER, SONIA J	AV. PPAL EDF CENTRO SOLDER LOC. 8351	<input type="checkbox"/> Add
	VALENCIA, EDO CARABOBO, VE 02003	<input checked="" type="checkbox"/> Remove
		<input type="checkbox"/> Change
		<input type="checkbox"/> Add
		<input type="checkbox"/> Remove
		<input type="checkbox"/> Change
		<input type="checkbox"/> Add
		<input type="checkbox"/> Remove
		<input type="checkbox"/> Change
		<input type="checkbox"/> Add
		<input type="checkbox"/> Remove
		<input type="checkbox"/> Change

ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

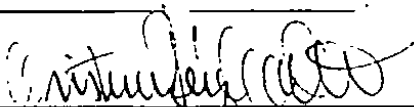
Effective date, if other than the date of filing: 11/23/2020 (optional)

If the date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
member's effective date on the Department of State's records.

word specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
filed.

11/23

2020



Signature of a member or authorized representative of a member

Cristina Perez Ovallo

Typed or printed name of signee