

L21000125775

Florida Department of State
Division of Corporations
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Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : EXPRESS BUSINESS & TAX SERVICES INC
Account Number : 120220000138
Phone : (786)239-9353
Fax Number : (305)675-8465

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

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H&H BD FASHION LLC

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: H & H BD FASHION LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.
Please return all correspondence concerning this matter to the following:

MD KAMRUL HOSSAIN
Name of Person
H & H BD FASHION LLC
Firm Company
1896 NW 145TH TER
Address
PEMBROKE PINES, FL 33028
City, State and Zip Code
AIMET@EXPRESSTAXSVCS.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MD KAMRUL HOSSAIN 786 239-9353
Name of Person at () Area Code Daytime Telephone Number

Enclosed is a check for 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)

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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

H&H BD FASHION LLC

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

The Articles of Organization for this Limited Liability Company were filed on 03-17-2021 and assigned
Florida document number L21000125775.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

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)

_____ 207

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

_____ 207

B. If amending 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

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 Changing 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	ARIF UZZAMAN	1896 NW 45TH TER	☒ Add
		PEMBROKE PINES, FL 33028	☐ Remove
			☐ Change
MGRM	MONIREZ ZAMAN	1896 NW 45TH TER	☒ Add
		PEMBROKE PINES, FL 33028	☐ Remove
			☐ Change
MGRM	MOHAMMED H. RASHID	1896 NW 45TH TER	☒ Add
		PEMBROKE PINES, FL 33028	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

