

L21000149120

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

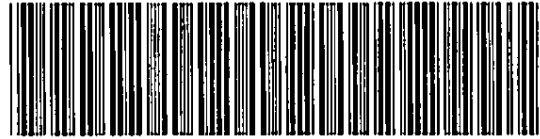
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700364367597

05/17/21--01022--017 **30.00

6/22/21
[Signature]

2021 JUN 22 10:52
[Stamp]

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HMC LEGACY, LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

MARILU COSTA

Name of Person

HMC, LEGACY, LLC

Firm/Company

6800 NW 39TH AVE LOT 50

Address

COCONUT CREEK, FL 33073

City/State and Zip Code

MARILU0707@OUTLOOK.COM

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

For further information concerning this matter, please call:

MARILU COSTA

786
at ()

351-7505

Name of Person

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

HMC LEGACY, LLC

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	MARILU COSTA	6800 NW 39TH AVE LOT 50	<input checked="" type="checkbox"/> Add
		COCONUT CREEK, FL 33073	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	HELIS COLLADO	6800 NW 39TH AVE LOT 50	<input type="checkbox"/> Add
		COCONUT CREEK, FL 33073	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	HELIS COLLADO	6800 NW 39TH AVE LOT 50	<input checked="" type="checkbox"/> Add
		COCONUT CREEK, FL 33073	<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins or other markings on the paper.

(If an effective 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) **Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated MAY 11 2021

Signature of a member or authorized representative of a member

Typed or printed name of signee

13