

L21 000 330 470

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

 PICK-UP☐ WAIT

MAIL

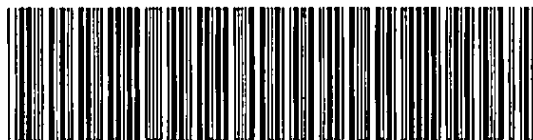
(Business Entity Name)

(Document Number)

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2021 JUL 30 AM 9:55

1. *Introduction*

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: HOLLYTOWN 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:

ALEXIS BOGOMOLNI

\_\_\_\_\_  
Name of Person

HOLLYTOWN LLC

\_\_\_\_\_  
Firm/Company

2980 NE 207 ST, STE 603

\_\_\_\_\_  
Address

AVENTURA, FL 33180

\_\_\_\_\_  
City/State and Zip Code

ALEXISBOGO99@GMAIL.COM

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

For further information concerning this matter, please call:

ALEXIS BOGOMOLNI

786 252.9459  
at ( )

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

HOLLYTOWN, 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 07/20/2021 and assigned  
Florida document number L21000330470.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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*

*City*

*Florida*

*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>
MGR	BH GROUP, LLC	2980 NE 207 STREET,	<input type="checkbox"/> Add
		SUITE 603	<input checked="" type="checkbox"/> Remove
		AVENTURA, FL 33180	<input type="checkbox"/> Change
MGR	ABH DEVELOPER GROUP, LLC	2980 NE 207 STREET,	<input checked="" type="checkbox"/> Add
		SUITE 603	<input type="checkbox"/> Remove
		AVENTURA, FL 33180	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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2021 JUL 30 AM 9:25  
CLERK OF DISTRICT COURT  
CLERK OF DISTRICT COURT

2791 JUL 30 AM 9:55  
211416001 MC00A

(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)

If the record 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 record is filed.

Dated JULY 27, 2021

Signature of a member or authorized representative of a member

ALEXIS BOGOMOLNI

Typed or printed name of signee

**Filing Fee: \$25.00**