

L21000385787

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

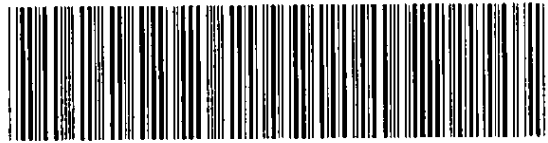
(Business Entity Name)

(Document Number)

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2023 SEP 25 AM 10:27  
TALLAHASSEE, FL

*[Handwritten signature]*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 7, 2023

ULRICH HANSEN  
2394 N. FEDERAL HWY  
FT. LAUDERDALE, FL 33305

SUBJECT: HANSEN DUTRA ENTERPRISES LLC  
Ref. Number: L21000385787

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TALLAHASSEE, FL

We have received your document for HANSEN DUTRA ENTERPRISES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tammi Cline  
Regulatory Specialist II Supervisor

Letter Number: 123A00020574

SEP 20 2023

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: HANSEN DUTRA ENTERPRISES 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:

LEE D. GLASSMAN, ESQUIRE

Name of Person

THE GLASSMAN LEGAL GROUP

Firm/Company

2200 NORTH COMMERCE PARKWAY, SUITE 105

Address

WESTON, FLORIDA 33326

City/State and Zip Code

lee@leeglassman.com

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

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TALLAHASSEE, FL

For further information concerning this matter, please call:

LEE D. GLASSMAN, ESQUIRE

954  
at ( )

915-8800

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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

HANSEN DUTRA ENTERPRISES 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 08/30/2021 and assigned  
Florida document number L21000385787.

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)

6231 MELALEUCA ROAD

SOUTHWEST RANCHES, FLORIDA 33330

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

6231 MELALEUCA ROAD

SOUTHWEST RANCHES, FLORIDA 33330

**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:

LEE D. GLASSMAN, ESQUIRE

New Registered Office Address:

2200 NORTH COMMERCE PARKWAY, SUITE 105

*Enter Florida street address*

WESTON

*City*

, Florida 33326

*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.*

*(Signature)*  
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>
AMBR	Anderson Dutra de Alencida	4185 Staghorn Lane	<input type="checkbox"/> Add
		Weston, Florida 33331	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Natalia Trindade Varela Dutra	4185 Staghorn Lane	<input type="checkbox"/> Add
		Weston, Florida 33331	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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TALLAHASSEE, FL

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ALL  
TALLAHASSEE, FL

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2023 SEP 25 AM 10:27  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FL

**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 SEPTEMBER 1 2023

ULRICH HANSEN

Typed or printed name of signee