0004131499 Division of Corporations e Selle

Page 1 of 2

Florida Department of State Division of Corporations **Electronic Filing Cover Sheet** 

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

From: Account Name : CAPITOL SERVICES, INC. Account Number : 120160000017 Phone : (855)498-5500 Fax Number : (800)432-3622

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

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HABS 3 LLC Certificate of Status 0 1 Certified Copy 04 Page Count ALLANKSSE

OCT 1 9 2021 A. LUNT

2021 OCT 18 AM 10:

Estimated Charge

\$55.00

## **COVER LETTER**

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## TO: Registration Section Division of Corporation

**Division of Corporations** HABS 3 LLC SUBJECT: \_ 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: George Habib Name of Person Habs 3 LLC Firm/Company 9720 SW 123 Street Address Miami, Florida 33176 City/State and Zip Code habibgeorge3@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Matthew H. Jacobson at (\_\_\_\_\_\_305 539-7372 Daytime Telephone Number Name of Person Area Code Enclosed is a check for the following amount: 🖾 \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Street Address: Mailing Address; **Registration Section** Registration Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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Leslie Sellers 8004323622	(04/06)	10/18/2021	08:19:26 AM
ARTICLES OF A TO		H2	1000387078
ARTICLES OF O	RGANIZATION		
OF	,		
HABS 3 LLC			282
(Name of the Limited Liability Company (A Florida Limited Liability)	y as it now appears on our reability Company)	ecords.)	2021 OCT 1
The Articles of Organization for this Limited Liability Company v	vere filed onSeptemb	er 17, 2021	and assigned <b>7</b>
Florida document number <u>L21000413495</u>			
This amendment is submitted to amend the following:			AM IO: 1
A. If amending name, enter the new name of the limited liabil	ity company here:		<b>1</b>
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation	"LLC" or the abbre	viation "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 as agent and/or the new registered office address here:	idress on our records, <u>e</u>	inter the name of	of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street a	2007-033	
	City	_, Florida	Zin Code
	City		πφ Ουως
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

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(05/06) 10/18/2021 08:19:58 AM

 If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:
 H21000387078

 MGR = Manager
 H21000387078

 AMBR = Authorized Member
 Title

 Name
 Address
 Type of Action

MGR	Julic P. Habib	9720 SW 123 Street	🗆 Add
		Miami, Florida 33176	NRemove
			Change
<u></u>			🖾 Add
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## D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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(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) <u>Note:</u> 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.

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 Dated	October 15	2021
	Q	wighta M.
		Signature of a member or authorized representative of a member
	George I	labib
		Typed or printed name of signee

Filing Fee: \$25.00