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T. MATTHEWS MAY 17 2022

COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

SUBJECT:	THE HANNA	H Grosp (<u>(</u>
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Joe	Name of Person	
		-IE HANNAH (roup
	12808 H	Address	
	Riv	City/State and Zip Code	8
	THE HAA E-mail address: (to be used for future annual report noti	nil.com
For further information c	oncerning this matter, please ca	all:	
JOEL HA	ANNAH	at (<u>213</u>) <u>900 -</u> Area Code Daytim	2633
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	2 \$60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration 5		<u>Street Address:</u> Registration Se	ction
Division of C		Division of Cor	porations
P.O. Box 632	.7	The Centre of T	Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT.

TO



THE HANNAH Group LLC

(Name of the Limited Liai (A Flor	bility Company as it now appears on our records.) rida Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number $\frac{L}{2200012}$	Company were filed on $\frac{3/14/2022}{2022}$ and assigned 22669
This amendment is submitted to amend the following:	:
A. If amending name, enter the new name of the li	imited liability company here:
The new name must be distinguishable and contain the words "I	.imited Liability Company," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET AD	DRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
THE THE PARTY OF THE PARTY	
B. If amending the registered agent and/or register agent and/or the new registered office address here	red office address on our records, <u>enter the name of the new registered</u> <u>e</u> :
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	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 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>	Address	Type of Action
CED	JOEL HANNAH	12808 HAMPTON HILL D	<u>C</u> ⊡√dd
		RIVERVIEW, FL 33578	□Remove
			□Change
10 <u>11508</u>	THERESA HANNAH	12808 HAMPTON HILL DO	Chand
		RIVERVIEW, FL 33578	□Remove
			BChange
			□Add
			□Remove
			□Change
			□ Remove
			□Change
			
			□Remove
			□Change
		-	□Add
		-	□Remove
			□Change

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(If an effection Note: 1	re date, if other than the date of filing:
the record cord is file	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 d.
Dated _	April 6 20:32.
	Signature of a member or authorized representative of a member
	ANTHORITE OF A INCOME OF A COMPACT PROPERTY OF A TOTAL OF A COMPACT OF