

1220000245205

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

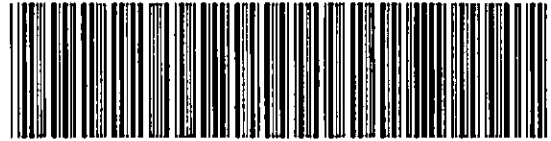
(Business Entity Name)

(Document Number)

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DEC 21 2022

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SEP 29 11:46  
DIVISION OF  
REGISTRATION

Return address

910 Nancy Court  
Kissimmee Fl,34759

Daytime telephone number  
321-525-1477

Email:  
Hadashapoolservices@gmail.com

Dear Florida Department of State,  
Here in this cover letter is the requested  
information.

Sincerely,  
Guillermo J. Sanchez Moreno  
Hadasha Pool And Spa Services LLC

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** HADASHA POOL AND SPA SERVICES 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:

GUILLERMO J. SANCHEZ MORENO

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

HADASHA POOL AND SPA SERVICES LLC

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

910 NANCY COURT

\_\_\_\_\_  
Address

KISSIMMEE, FL 34759

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

hadashapoolservices@gmail.com

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

For further information concerning this matter, please call:

GUILLERMO J SANCHEZ MORENO

321

525-1477

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
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**

HADASHA POOL AND SPA SERVICES 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 MAY 26, 2022 and assigned  
Florida document number L22000245205.

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)**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATE FILINGS  
SEP 29 AM 1 44

**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*

Florida

*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 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	JENNY ALEMAN PACHECO	910 NANCY CT KISSIMMEE FL 34759	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" 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

SECTION 4  
DIVISION 1  
STEP 2  
AH  
16

**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

The purpose for the amendment is to change JENNY ALEMAN PACHECO from AR to MANAGER.

Jenny Aleman Pacheco sign this amendment accepting the appointment, and stated that she is familiar with and accepts the obligations of the position.

SEP 29 AM 1 46  
DIVISION OF  
ST. JAMES

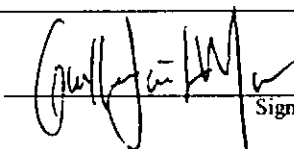
**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(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.

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 September 1, 2022



Signature of a member or authorized representative of a member

Guillermo J. Sanchez Moreno

/



Jenny Aleman Pacheco

Typed or printed name of signee