L22 000 246 850

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of	Status
Special Instructions to Filing Officer:	
·	

Office Use Only

A. RIVERS



700396227287

18/19/23--01089--001 **80.00

SEA TO THE STATE OF SEA

COVER LETTER

TO:

Registration Section

Division of Corporations					
SUBJECT: Hartbe, LL	<u></u>				
• ;	Name of Limited Liability Company				
The enclosed Articles of Amendment and fe	e(s) are submitted for filing.				
Please return all correspondence concerning	this matter to the following:				
X	Sacrel Hart Name of Person				
	Panic M y Claun				
	HCC + CD LLC Firm/Company				
	, and examples of				
48:	4 Fairway Dr S				
	Address				
()	City/State and Zip Code				
Ha	r+beaymnastics@gmail.com				
li-m	al address: (to-be used for future annual report notification)				
For further information concerning this matt	er, please call:				
Rachal Hart	11757 \ 303 DIST				
Name of Person	at (101) 505 a(151) Area Code Daytime Telephone Number				
Enclosed is a check for the following amoun	<u>.</u> :				
□ \$25.00 Filing Fee S \$30.00 Filing Certificate of	,				
Certificate ((additional copy is enclosed) Certified Copy				
	(additional copy is enclosed)				
Mailing Address:	Street Address:				
Registration Section Division of Corporations	Registration Section Division of Corporations				
P.O. Box 6327	The Centre of Tallahassee				
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810				
	Tallahassee, FL 32303				

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Harthe 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 $\frac{5}{127}$ $\frac{27}{20}$ and assi Florida document number $\frac{L22000246850}{246850}$	gned
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 "LL	.
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, <u>enter the name of the new agent and/or the new registered office address here</u> :	registere
Name of New Registered Agent	
New Registered Office Address	
Enter Florida street address	
New Registered Agent's Signature, if changing Registered Agent:	
2.	, , ,
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or; if this document the limited liability 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.	i and nent is
If Changing Registered Agent, Signature of New Registered Agent	

or removed	from our records:		
MGR = M AMBR = A	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Azaria Hart	4824 Fairway Or Punta Gorda Fl	
			Change
			□Add
			□Remove
			Change
			□Add
			Remove
			□Change
			□ Add
			□Remove
			□Change
			□Remove
			□ Change
			□Remove
			□Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

D. If ame	ending any	other infor	rmation, e	nter change(s	s) here: (Atta	ıch addition	nal sheets, if ne	cessary.)	
-	m (order	40	estak	dish_	a 6	usines	S	_
_	ban	bina.	acc	cunt	1 M	ave	been	request	ed
	to i	(PMC	\ <i>l</i> O	"CEO	" A70	WiCi	Hourt	from	<-1
-								minor	_
_	<u></u>	1,/16		10	1 (-1	1,/(_1	() ()	11111101	<u>•</u>
-									_
-									_
-	. <u>-</u>								_
-				_					_
-									_
_									_
-									_
-		_	_	<u> </u>					_
-									_
-				_	<u> </u>		<u> </u>		_
-		= .							<u> </u>
-									_
(If an eft <u>Note:</u>	If the date i.	listed, the date nserted in the	must be spe is block do	cific and cannot b	applicable sta		e than 90 days afte	ional) er filing.) Pursuant to 60 iis date will not be lis	
If the recor record is fi		delayed effe	ective date.	but not an effe	ctive time, at 1	2:01 a.m. or	the earlier of: (b) The 90th day aft	er the
Dated		+ 14	<u>-</u>		132				
		P	Oel	are of a member	or authorized re	presentative o	f a niember		
			B	OCNE) Typed o	Hart or printed name	of signee			