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SECRETARY OF STATE TALLAHASSEE

COVER LETTER

TO: Registration S Division of Co			
SUBJECT: Hurri	cane Holding Ve	ntures, LLC	
SUBJECT:		ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Jasmine Jam	es	
		Name of Person	
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
	1712 Pioneer	Ave	
		Address	
	Cheyenne, \	NY 82001	
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notific	ration)
For further information	concerning this matter, please c	all:	
Jasmine Ja	mes	307 \ 632-3333	
	of Person	at ()	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 Addr Registration Division of P.O. Box 63 Tallahassee	Section Corporations 327	Street Address: Registration Sect Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL 3	orations Ilahassee Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hurricane Holding Ventures, LLC			
(Name of the Limited Liability Compa- (A Florida Limited L	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number L22000294000 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability	ility company here:		
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	1309 Coffeen Avenue STE 1200		
Principal office address MUST BE A STREET ADDRESS)	Sheridan, WY, 82801		
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>)	1309 Coffeen Avenue STE 1200 Sheridan, WY, 82801		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new register		
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
<u>-</u>	, 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.

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Iffective date, if other than the dat	e of filing:		(optional)	8: 43 STATE
fan effective date is listed, the date must be s Note: If the date inserted in this block of document's effective date on the Depar	specific and cannot be prior does not meet the applications.	to date of filing or more able statutory filing r	than 90 days after filing.)	Pursuant to 605.0207
record specifies a delayed effective da d is filed.	te, but not an effective ti	me, at 12:01 a.m. on	the earlier of: (b) The	90th day after the
Dated October 27th	, 2022	·		
	1 - /			
(Sign	Amine time &	orized representative of	a member	
Jasmine Jame				
		ed name of signee		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Compar	pany as it now appears on our records.) d Liability Company)		
The Articles of Organization for this Limited Liability Compar			
Florida document number L22000294000	ny were filed on 06/29/22	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liz	ability company here:		
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or th	e abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	1309 Coffeen Avenue S	TE 1200	
(Principal office address MUST BE A STREET ADDRESS)	Sheridan, WY, 82801		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1309 Coffeen Avenue S Sheridan, WY, 82801	STE 1200	
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our records, <u>enter the n</u>	name of the new registere	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	, Florida , Florida	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.

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ffective date, if other than the date an effective date is listed, the date must be ote: If the date inserted in this block ocument's effective date on the Department.	specific and c does not me	cannot be prior to cet the applica	o date of filing o	or more than 90 d	_ (optional) ays after filing.) nts, this date w	Pursuant to 605.0207 vill not be listed as
record specifies a delayed effective d is filed.	ate, but not a	in effective tin	ne, at 12:01 a.	m. on the earlie	er of: (b) The	90th day after the
October 27th	. ,	2022	. ·			
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	gnature of a m	ember or author	rized representa	tive of a member		