## Laa000334672

(Re	equestor's Name)
(Ac	ddress)
(Ac	ddress)
(Ci	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bı	usiness Entity Name)
(Do	ocument Number)
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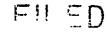
2022 SEP 14 AH 10: 1022 SEP 14 AH 10: 53

## **COVER LETTER**

TO: Registration Se Division of Cor			
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SUBJECT:	Hay Hays Bbo	Hed Liability Company	
	, , , , , , , , , , , , , , , , , , , ,	near 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:	
	Tamny (1)	Prokiewicz Name of Person	
	J	Name of Person	
		Firm/Company	
	6119 Kno	Hy Dine Ct.	
	Post Dran	City/S'ate and Zip Code  15 Pe use/ for future annual report noti	, <i>P</i>
		City/State and Zip Code	<del></del>
	Hay Hay Sh! E-mail address: (	16 Pe used for future annual report noti	fication)
For further information of	concerning this matter, please co	_	
Name o	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	C \$55.00 Filing Fee & Certified Copy (c lifitional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	
Registration ( Division of C		Registration Se Division of Cor	
D D BOOK OF C	. COLLECTION CO.	DIVISION OF COL	PART MERCHANI

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION



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OI	F
	2022 SEP 14 AM 10: 53
Hay Hays Bho (Name of the Limited Liability Comban (A Florida Limited Li	nv as it now appears on our Artedords (ASSEELED )
The Articles of Organization for this Limited Liability Company v Florida document number <u>L 22000334672</u> .	were filed on July 28 , 2000 and assigned
Florida document number L 2200055 1673.	•
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	ility company here:
Hay Hous Rha / 1 C	
The new name must be distingue hable and contain the words. Limited Liabilit	ity Company," the designation "L.L.C." 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)	
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	iddress on our records, <u>enter the name of the new registere</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Flovida street address

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 agen' 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.

City

If amending Authorized Person(s) authorized to manage, <u>enter the title, narge, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Veronica Buck	6179 Knotty Pine Ct.	□Add
		16179 Knotty Pine Ct.  Port Orange F1 32127	PRemove
			□ Change
			🗆 Add
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ective date, if other to effective date is listed at			o date of filing or mo:	c than 90 days after fi	al) ling.) Pursuant to 605.020
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cument's effective date	on the Oepartment t	Tatale s reed us.			
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September	Tanny Signature of	Cuckie ta member or subor	(UC)	f a momber	