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COVER LETTER

	on Section of Corporations	
AS H	EPFER, A FLORIDA LIMITED	LIABILITY COMPANY
SUBJECT:	Name of I	Limited Liability Company
The enclosed Articl	les of Amendment and fec(s) are	submitted for filing.
Please return all cor	rrespondence concerning this mat	tter to the following:
	Valerie M. Hassan	
		Name of Person
	Velazquez and Perez Pe	erez Law Firm, PLLC
		Firm/Company
	782 NW 42nd Ave Ste.	. 332
		Address
	Miami, FL 33126	19
		City/State and Zip Code
	Valerie@vpplawfirm.co	m/Daniela@vpplawfirm.com
	E-mail addres	m/Daniela@vpplawfirm.com ss: (to be used for future annual report notification)
For further informat	tion concerning this matter, pleas	e call:
Valerie M. Hassan		305 549-8280
<u>N</u>	ame of Person	Area Code Daytime Telephone Number
Enclosed is a check	for the following amount:	
■ \$25.00 Filing F	Cecc S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Ao</u> Registrat	ddress: ion Section	Street Address: Registration Section
Division	of Corporations	Division of Corporations
P.O. Box	6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AS HEPFER, A FLORIDA LIMITED LIABILITY CO	DMPANY	
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company v	were filed on 08/03/2022	and assigned
Florida document number L22000342932		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
AS Hepfer, LLC		
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbr	reviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		22 <u>\$</u>
Enter new mailing address, if applicable:		AUG
(Mailing address MAY BE A POST OFFICE BOX)		19
		70
B. If amending the registered agent and/or registered office ad	ddress on our records, enter the name	of the new registered
agent and/or the new registered office address here:		क हैं
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 agre-	e to act in this capacity. I further agre	e 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>	Address	Type of Action
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ffective date, if other than the d	ate of filing:		(optional)	
an effective date is listed, the date must be store: If the date inserted in this block	e specific and cannot be	prior to date of filing	or more than 90 days	after filing.) Pursuar	it to 605.020 the listed a
ocument's effective date on the Dep			time requirement	i, mis date with not	
record specifies a delayed effective	date, but not an effecti	ive time, at 12:01 a	a.m. on the earlier	of: (b) The 90th d	ay after the
d is filed.					
August 15	2022				
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vated					
	Anne j	Marie Hes	fer		

Filing Fee: \$25.00