L23-001-42-42-9

(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:
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 $(x_1, \dots, x_n) = (x_1, \dots, x_n) \in \mathbf{B}.$

TO:

Registration Section

Division of Cor	porations		
SUBJECT:	H of 1	DS Group LLC ited Liability Company	
	Name of Em	ned Babiny Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
		Hope Lee Name of Person	
		DS Group LLC Firm/Company	
		oth Blud E U	
		City/State and Zip Code	
		2010 @ a newil - con to be used for fundre annual report no	
For further information c	oncerning this matter, please c	all:	
Hope L	LL f Person	at (964) 73	ime Telephone Number
Ruchical is a check for th	o following amount:		
Enclosed is a check for th ☐ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy	☐ \$60.00 Filing Fee, Certificate of Status &
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)
Mailing Addres Registration S		Street Address: Registration S	Section
Division of C		Division of Co	
P.O. Box 632	7	The Centre of	
Tallahassee, I	FL 32314	2415 N. Mont	roe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Andalas - Commissions	. Paradala I		C	61-4	3/20/202	
The Articles of Organization Florida document number				ere med on	3/80/800	3 and assigned
			·			
This amendment is submitted	d to amen	id the following:				
A. If amending name, ente	er the nev	v name of the li	ni <u>ted liabili</u>	ty company he	ere:	2023
	The	•				
The new name must be distinguish	hable and c	ontain the words "Li	imited Liability	Company," the d	lesignation "LLC" or th	ne abbreviation "[L.L.C."
Enter new principal offices	address	, if applicable:				9
(Principal office address M	UST BE .	A STREET ADL	ORESS)		-N/A	<u> </u>
						~
Enter new mailing address						
(Mailing address MAY BE)	<u>A POST (</u>	OFFICE BOX)			N A	
					····	=
B. If amending the register	_	_		dress on our r	ecords, <u>enter the n</u>	name of the new regi
igent and/or the new regist	tered offi	ice address here	:			
					ala	
Name of New Regi	istered Ag	gent:	. <u></u> .		ria	
New Registered Of	ffice Addi	ress:		Futur Elos	MQida street address	
11011 Itegistered Of				siner cioi		,
ren registered of				Ma	Florida	Zin Code
ivew registered 9.				CW		

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 Perzon(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
			
			Remove
			Change
	1	/	
	\cdot	\	Change
			□Add
			Remove
			Change
			□Add
			□Remove
			Change
			□ Remove
			Change
			□Add
			□Remove
			□Change

. II WIIIC	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ve date, if other than the date of filing:
f the record	d 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 ed.
Dated	June 26 2023
	Signature of a member or authorized representative of a member
	Typed or printed name of signee





June 12, 2023

HOPE LEE 11 SOUTH BLVD E UNIT 75 MACCLENNY, FL 32063 US

SUBJECT: H&DS GROUP LLC Ref. Number: L23000142429

We have received your document for H&DS GROUP LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Corporation, but your entity is a Florida Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sharon D Franklin Regulatory Specialist II

JUN 2 9 2023

Letter Number: 023A00013216