## L23 000 247 129

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





900434914569

08/19/24--01018--018 \*\*25.00

24 FT 10 13H: 39

## **COVER LETTER**

TO:	Registration S Division of Co			
SUBJE		A HJM INVESTMENTS LLC		
SUBJE	CI:	Name of Lim	nited Liability Company	<del></del>
The enci	losed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		JEAN P TAREZIAN		
			Name of Person	<del></del>
		ARMENIA HJM INVEST	MENTS LLC	ode  fee & S60.00 Filing Fee,  Certificate of Status & Certified Copy (additional copy is enclosed)  Address: istration Section sion of Corporations Centre of Tallahassee
			Firm/Company	
		3141 VIA OTERO DR		
			Address	
		KISSIMMEE FL 34744		
			City/State and Zip Code	<del></del>
		AUTANITAGRILL@GMA	AIL.COM	
		E-mail address: (	(to be used for future annual report notification)	
For furth	ner information of	concerning this matter, please c	all:	
JEAN P	PIERRE TAREZ	IAN	at ( )	
	Name o	of Person	Area Code Daytime Telephone Nu	mber
Enclosed	d is a check for t	he following amount:		
<b>■ \$</b> 25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Cert (additional copy is enclosed) Cert	ificate of Status & ified Copy
	Mailing Addres Registration		Street Address: Registration Section	
	Division of C		Division of Corporations	
	P.O. Box 632	27	The Centre of Tallahassee	
	Tallahassee,	FL 32314	2415 N. Monroe Street, Sui	te 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ARMENIA HJM INVESTMENTS LLC		
( <u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our records a Limited Liability Company)	<u></u>
	05110/2002	
The Articles of Organization for this Limited Liability (		and assigned
Florida document number L23000247129	<del>.</del>	
Γhis amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
		. 2
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Catan nameninal offices address if applicables		
Enter new principal offices address, if applicable:		
<u> Principal office address MUST BE A STREET ADDI</u>	RESS)	<del></del>
	<del></del>	
		် (၁
Enter new mailing address, if applicable:		···
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere	d office address on our records, enter t	the name of the new regis
agent and/or the new registered office address here:	a office against on our records, <u>emer-</u>	are trained of the field of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Enter Florida street address	
	<del></del>	rida
	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.

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
MGR	TAREZIAN, HAGOP	3141 VIA OTERO DR	
		KISSIMMEE FL 34744	□Remove
			■ Change
MGR	TAREZIAN, JOSEP	3141 VIA OTERO DR	□Adđ
		KISSIMMEE, FL 34744	■Remove
			□ Change
MGR	TAREZIAN, MAIKEL	3141 VIA OTERO DR	
		KISSIMMEE FL 34744	■Remove
			Change
			□ Add
			□Remove
			□Change
			DAdd
			□Remove
		<del></del>	Change
			□Add
			□Remove
			□ Change

				<u> </u>		
				<u>.                                    </u>		<u>_</u>
	<u> </u>					<del></del>
	· <del>-</del> ·					
	<del></del> -					
			<del></del>			<u> </u>
<del></del>			<del></del> _			
<u> </u>				<del>-</del>		
			_			
					<del> </del>	<del></del>
			<del>_</del>	<del></del>		<del></del>
n effective date is lis ote: If the date ins	ther than the date ted, the date must be spected in this block do date on the Departr	ecific and cannot be oes not meet the a	pplicable statutor	ig or more than 90 day	(optional) ys after filing.) Pursuant its, this date will not b	to 605.0207 be listed as
is filed.				a.m. on the earlier	of: (b) The 90th day	y after the
AUGUST 13	·	2024	·			
	Jen P.	lare of a member or	authorized represe	ntative of a member		<del>_</del>
	Signa	tare or a member or	aumonizeu represe	manye or a memoer		
	ΓAREZIAN					

Filing Fee: \$25.00