# L23000271142

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
V- / /
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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WALLAHASSEE, FL



## FLORIDA DEPARTMENT OF STATE Division of Corporations

August 4, 2023

IGAL HEBRON B&H INVESTMENTS LLC 4224 N OCEAN DR HOLLYWOOD, FL 33019 US

SUBJECT: B&H INVESTMENTS LLC

Ref. Number: L23000271142

We have received your document for B&H INVESTMENTS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The title you have listed for the individual(s) managing the LLC is not acceptable.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such Littles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

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) 245-6050.

Antoinette A Gonzalez Regulatory Specialist II

Letter Number: 223A00017631

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www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 3

### **COVER LETTER**

	ion Section of Corporations	
B&H SUBJECT:	Investments LLC	
SUBJECT:	Name of Limited Liability Company	
The enclosed Artic	les of Amendment and fee(s) are submitted for filing.	
	rrespondence concerning this matter to the following:	
	lgal Hebron	
	Name of Person	<del></del>
	B&H Investments LLC	
	Firm Company	
	4224 N Ocean Dr	7023 AUG 24
	Address	
	Hollywood FL 33019	The second secon
	City/State and Zip Code igal.hebron@nifao.com	AH IO: 2
	E-mail address: (to be used for future annual report notification)	- Fig. 21
For further informa	tion concerning this matter, please call:	
Igal Hebron	954 4943055	
	lâme of Person Area Code Daytime Telepho	ne Number
Enclosed is a check	t for the following amount:	
■ \$25.00 Filing H	Fee Solution Status Solution Status Solution Status Certified Copy radditional copy is enclosed)	\$60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing A</u> Registra	ddress: Street Address: tion Section Registration Section	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

**B&H Investments LLC** (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on June 7 2023 and assigned Florida document number  $\frac{1.23000271142}{}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address \_, Florida

#### 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 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>	<u>Address</u>	Type of Action
MAGG	Nicole Cook	4224 N Ocean Dr Hollywood FL 33019	■Add
			□Remove
AMBR	Ariela Benit	4224 N Ocean Dr Hollywood FL 33019	□ Change
	- Treat Deni		<b>≣</b> Add
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		ALLAHASSEE FU	
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(If an effective date is listed, the object. If the date inserted in document's effective date of	n this block does not	meet the applical	o date of filing or mo ble statutory filing	re than 90 days after requirements, this	filing.) Pursuant date will not b	to 605.01 be listed	207 (3 as th
the record specifies a do ) The 90th day after th			an effective ti	me, at 12:01 a	.m. on the	earlier	of:
(-/-)	/2010						
Dated	5						
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_04	<u></u>						
- A. F.	Signature of a	a member or author	rized representative of	of a member			

Page 3 of 3