

9/24/24, 11:47 AM

Division of Corporations

L23 **438766**
Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : UNITED ACCOUNTANTS LLC
Account Number : I20230000115
Phone : (813)773-4973
Fax Number : (813)440-4499

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

OCT 1 - 1 AM 7:45

JD

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

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2024 OCT - 1 PM 12:41

DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
HOSTAK II LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

10/01/24

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COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: HOSTAK II LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALI IRAQ
Name of Person

Firm/Company

7441 US HWY 301 S UNIT 111
Address

RIVERVIEW, FL 33578
City/State and Zip Code

INFO@UNIACC.NET
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ALI IRAQ 813 3892251
Name of Person at () Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

Street Address:
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**

HOSTAK III 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 09/21/2023 and assigned Florida document number 1.23000438966.

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 "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 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:

ALI IRAQ

New Registered Office Address:

1132 RISING MIST BLVD

Enter Florida street address

RIVERVIEW

City

Florida 33578

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.

Ali Iraq
My exp. date is 09/21/2025

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>	<u>Type of Action</u>
MGR	KHALED ERAQ	12119 TREE HAVEN AVE	<input type="checkbox"/> Add
		GIBSONTON, FL 33534	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	SAAD ERAQ	12119 TREE HAVEN AVE	<input checked="" type="checkbox"/> Add
		GIBSONTON, FL 33534	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	ALI IRAQ	1132 RISING MIST BLVD	<input checked="" type="checkbox"/> Add
		RIVERVIEW, FL 33578	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

STATE
MANAGEMENT, FL
11/15/15
11:00 AM

OCT 1 AM 7:45
 MISSISSAUGA
 MISSISSAUGA, ONT.

100-11417-15

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record 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 record is filed.

Dated SEPTEMBER 24TH, 2024

Ali Iraq
Ali Iraq (Sep 24, 2024 11:21 EDT)

Signature of a member or authorized representative of a member

ALI IRAQ

Typed or printed name of signee

Filing Fee: \$25.00