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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EXPAT CONSULTING CORP.

Account Number : I20190000095 Phone : (407)745-1112 Fax Number : (407)641-8083

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

SILVIA@EXPATCONSULTING.COM Email Address:____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HUB BUSINESS LLC

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T. LEMIEUX DEC 22 2023

From: EXPAT CONSULTING

TO:

Registration Section

COVER LETTER

ESS LLC		
Name of Lim	ited Liability Company	
nendment and fee(s) are sub	mitted for filing.	
ence concerning this matter	to the following:	
SILVIA FREGNI		
	Name of Person	
EXPAT CONSULTING.C	ОМ	
	Firm/Company	
8615 COMMODITY CIR.	ST 11	
	Address	
ORLANDO - FL - 32819		
	City/State and Zip Code	
SILVIA@EXPATCONSUT	TLING.COM	
E-mail address: (to be used for future annual report noti	fication)
cerning this matter, please ca	all:	
	407 745.1112	
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Call and an arrange		
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\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	 \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	StreetAddress:	
porations		
32314		e Street, Suite 810
	Name of Lim nendment and fee(s) are sub ence concerning this matter SILVIA FREGNI EXPAT CONSULTING.C. 8615 COMMODITY CIR. ORLANDO - FL - 32819 SILVIA@EXPATCONSULT E-mail address: (cerning this matter, please concerson following amount: \$\square{C}\$\$ \$30.00 Filing Fee &	Name of Limited Liability Company nendment and fee(s) are submitted for filing. ence concerning this matter to the following: SILVIA FREGNI Name of Person EXPAT CONSULTING.COM Firm/Company 8615 COMMODITY CIR. ST 11 Address ORLANDO - FL - 32819 City/State and Zip Code SILVIA@EXPATCONSUTLING.COM E-mail address: (to be used for future annual report notice cerning this matter, please call: at (

Tallahassee, FL 32303

To: SUNBIZ . Page: 6 of 8

Fram: EXPAT CONSULTING

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HUB BUSINESS 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 12/18/2023	andassigned
Florida document number L23000556233	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
HUG BUSINESS LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbra	eviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Trincipal office address brost be A STREET ADDRESS)	
(Frincipal Office address WOST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
Enter new mailing address, if applicable:	
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 content	of the new registe
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 content	of the new registe
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 content	13
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 content	13
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON) B. If amending the registered agent and/or registered office address on our records, enter the name of agent and/or the new registered office address here: Name of New Registered Agent:	13
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON) B. If amending the registered agent and/or registered office address on our records, enter the name of agent and/or the new registered office address here:	13
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 agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	

Thereby 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.

To. SUNBIZ . Page. 7 of 8 2023-12-21 20:52:53 GMT 14076418083 From: EXPAT CONSULTING

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

Title	<u>Name</u>	Address	Type of Action
			□Add
			Remove
			□ Change
			□ Remove
			□ Change
			🗇 Add
			Псточе
			☐ Change
			🗀 Add
		Remove	
		Change	
		□Remove	
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Note:	ve date, if other than the date of filing:
ne rec The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated_	ORLANDO, 21 , 2023 .
	Signature of a member or authorized representative of a member