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(Re	questor's Name)	
(Ad	dress)	<u>.</u>
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(Cit	y/State/Zip/Phone	e #)
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registration Section Division of Corporation		•	•
SUBJECT: Hug	hey Hone Name of Lim	Services Lited Liability Company	<u>LC</u> .
The enclosed Articles of Amo	endment and fee(s) are sub	mitted for filing.	
Please return all corresponde	nce concerning this matter	to the following:	
-	Stoph	en Hughey Name of Person)	
	Hughey,	Horne Services	s LLC
	636 E	COCS15 AVC	nul
	Melbo	urne FL	22901
-	hugheighe E-mail andress:	City/State and Zip Code OMCSCIVICES // to be used for future annual report notif	2901 Comail, com
For further information conce	~		•
Stephen Name of Per	Hughey		9532 Telephone Number
Enclosed is a check for the for	,		•
\$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)
<u>Mailing Address:</u> Registration Sect	tion	Street Address: Registration Sec	tion
Division of Corr		Division of Con	

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

HUGHEY HOM.		<u>′</u> C
(Name of the Limited Liability Compan (A Florida Limited L	iy as it now appears on our records.) iability Company)	
The Articles of Organization for this Limited Liability Company of Florida document number 490002685	were filed on $\frac{1}{1} \frac{1}{1000} \frac{1}{1000} \frac{1}{1000} \frac{1}{1000}$	d assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liabil</u>	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbreviation	n "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	2024 Sa	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	112	
	0.2	
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	ddress on our records, <u>enter the name of the</u>	new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	ode .

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>	Address	Type of Action
MGR AP	Stephen Hughey	636 Georgia Avenue Melbourne, FL 3290	\\daggeright\lambda Add
AP	, , , , , , , , , , , , , , , , , , ,	Melbourne, FL 3290) / □Remove
			□Change
			□Add
		 	🗆 Remove
			□Change
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	if other than the date of fi			(optional)	
te: If the da	is listed, the date must be specific e inserted in this block does no ctive date on the Department of	ot meet the applicab			
cord specific s filed.	s a delayed effective date, but	not an effective time	e, at 12:01 a.m. on the	e earlier of: (b) The	90th day after the
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$_{\rm ed}$ I/I	25/2024				
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	Signature o	1 .	Hugh e j name of sigher		