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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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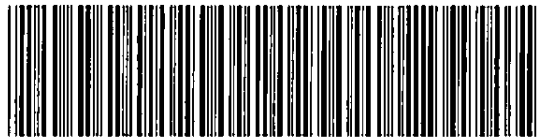
(Business Entity Name)

(Document Number)

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2024 APR 12 AM 8:05

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: _____

Hunnygirl, 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:

Kurt W. Hess
Name of Person

Hunnygirl LLC
Firm Company

1310 Girard Blvd M.I. FL. 32952
Address

Meritt Isl. FL. 32952
City/State and Zip Code

Kheas63@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kurt W. Hess at (321) 514-2289
Name of Person 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**

Hunnygirl 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 Feb. 19th and assigned Florida document number 99-1466163.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

No

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)

Same

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

Kurt W. Hess

New Registered Office Address:

same

1310 Girard Blvd.

Enter Florida street address

Movitt Isl.

City

Florida

32952

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.

Kurt W. Hess

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>
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Mgr.	Nicole R. Hess	1310 Girard Blvd.	<input type="checkbox"/> Add
		Merritt Isl. Fl. 32952	<input type="checkbox"/> Remove

to = Authorized member ☒ Change

Mgr.	Tracy A. Hess	1310 Girard Blvd.	<input type="checkbox"/> Add
		Merritt Isl. Fl. 32952	<input type="checkbox"/> Remove

to = Authorized member ☒ Change

Mgr.	Ethan W. Hess	1310 Girard Blvd	<input type="checkbox"/> Add
		Merritt Isl. Fl. 32952	<input type="checkbox"/> Remove

to = Authorized member ☒ Change

Mgr.	Jerma R. Hess	1310 Girard Blvd.	<input type="checkbox"/> Add
		Merritt Isl. Fl. 32952	<input type="checkbox"/> Remove

to = Authorized member ☒ Change

Authorized member	Kurt W. Hess	1310 Girard Blvd.	<input checked="" type="checkbox"/> Add
		Merritt Isl. Fl. 32952	<input type="checkbox"/> Remove

to = Manager ☒ Change

			<input type="checkbox"/> Add
--	--	--	------------------------------

			<input type="checkbox"/> Remove
--	--	--	---------------------------------

			<input type="checkbox"/> Change
--	--	--	---------------------------------

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Our family business goal is for Kurt W. Hess to be able to open the business banking accounts by himself. NO NEED for other family members to be able to do anything but have signing authority to deposit, withdrawal or move money from the business account.

Please set this business acct. (LLC) up accordingly

Thanks.

Kurt W. Hess

E. Effective date, if other than the date of filing: _____ (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

3/5/24

Kurt W. Hess

Signature of a member or authorized representative of a member

KURT W. HESS

Typed or printed name of signee