

L24 000 282 736

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

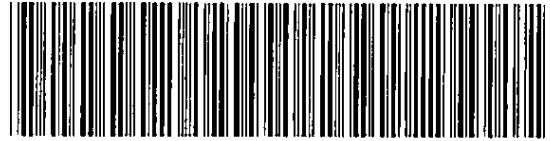
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400432582074

07/10/24--01029--001 **25.00

FILED
24 JUL 10 AM 4:53
JUL 10 2024

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: HULA HAI 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:

ARESH ALEX DEIGHANI
Name of Person

HULA HAI LLC
Firm/Company

8004 NW 154 STREET,SUITE 368
Address

MIAMI LAKES, FL 33014
City/State and Zip Code

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

For further information concerning this matter, please call:

ARESH ALEX DEIGHANI 786 277-8575
Name of Person at () Daytime Telephone Number
Area Code

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

HULA HAI 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 06/21/2024 and assigned
Florida document number L24000282736.

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:

New Registered Office Address:

Enter Florida street address

Florida

City

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.

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	MELVIN A. SLAWIK JR.	8004 NW 154 STREET,	<input type="checkbox"/> Add
		SUITE 368	<input checked="" type="checkbox"/> Remove
		MIAMI LAKES, FL 33014	<input type="checkbox"/> Change
MGR	MELVIN ANTHONY SLAWIK	8004 NW 154 STREET,	<input checked="" type="checkbox"/> Add
		SUITE 368	<input type="checkbox"/> Remove
		MIAMI LAKES, FLORIDA 33014	<input type="checkbox"/> Change
MGR	ARESH DEGHANI	8004 NW 154 STREET,	<input type="checkbox"/> Add
		SUITE 368	<input checked="" type="checkbox"/> Remove
		MIAMI LAKES, FL 33014	<input type="checkbox"/> Change
MGR	A. ALEX DEGHANI	8004 NW 154 STREET,	<input checked="" type="checkbox"/> Add
		SUITE 368	<input type="checkbox"/> Remove
		MIAMI LAKES, FL 33014	<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

[illegible]

(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.

2024

ARESH ALEX DEGHANI

Typed or printed name of signee