

L24000364651

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

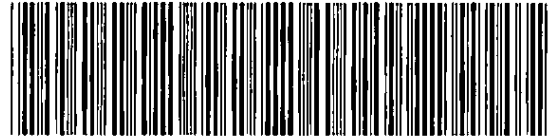
(Business Entity Name)

(Document Number)

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FILED
2024 OCT -7 PM 2:39
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KX

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HOPE 1692 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:

TUSHAR PATEL
Name of Person

HOPE 1692 LLC
Firm Company

1692 US HWY 17 PIERSON FL 32105
Address

City/State and Zip Code

TEXACO1692@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TUSHAR PATEL at (215) 939-7455
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

2024 OCT -7 PM 2:39

11:16:00

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

HOPE 1692 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 08-20-2024 and assigned Florida document number L24000364651.

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)

1692 US 17

BARBERVILLE, FL 32105

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:

TUSHAR PATEL

New Registered Office Address:

1692 US 17 BARBERVILLE, FL 32105

Enter Florida street address

BARBERVILLE

City

Florida 32105

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>
AMBR	GITTABEN PATEL	1692 US 17 BARBERVILLE, FL	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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Please remove Gittaben Patel
and keep Tushar & Mitul
Patel as owners with
50% partnership each.

2024 OCT - 7

2:19

2:19

2:19

2024 OCT -7 PM

2024 OCT - 7 PM 2:40

(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 October 3rd, 2024

Rush Patel

Signature of a member or authorized representative of a member

TUSHAR PATEL

Typed or printed name of signee

Filing Fee: \$25.00