p.1 https://efile.sunbiz.org/scripts/efilcovr.exe



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H25000014464 3)))



H250000144643ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : HUBCO

Account Number : 104662003400 Phone : (516)813-1184

Fax Number : (516)935-3088

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

tjones@jonesblack.com Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FUNDACASE.COM LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$30.00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H25000014464

(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L25000013057	y were filed on 01/09/2025	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited lial</u>	bility company here:	
The new name must be distinguishable and end with the words "Limited Lia	bility Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:		20
(Principal office address MUST BE A STREET ADDRESS)	: - 	25
		. = 7
	,	: W [
Enter new mailing address, if applicable:	1488 Deer Park Avenue, #126	
(Mailing address MAY BE A POST OFFICE BOX)	North Babylon, NY 11703	
		29
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address here. Name of New Registered Agent:		he name of th
New Registered Office Address:	Enter Florida street address	
	Florida	
	, Florida	Zip Code

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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.

15168131184

MGR = Manager

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

H25000014464

	••	4.13	T
<u>Title</u>	<u>Name</u>	Address	Type of Action
			O Add
			_ □ Remove
			Add
			П Remove
			
			□ Remove
			
			☐ Remove
			Add
			□ Remove
			☐ Remove

D.	If am	ending any other information,	enter change(s) here: (Attach addit	ional sheets, if necessary.)	H25000014464
					_
				· · · · · · · · · · · · · · · · · · ·	
					
					_
(The	The eff	fective date, if other than the date of filing: effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after date this document is filed by the Florida Department of State)			
	Dated	January 13	, 2025		
			<u>ab</u>		
		Signa	ture of a member or authorized representative		
			Timothy E. Jones, Esq	•	
			Typed or printed name of signee		

Page 3 of 3