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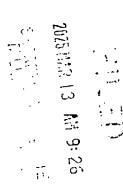
(Requestor's Name)
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(Business Entity Name)
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TALLAHASSEE COURTER'SERVICES

tallahasseecourier@gmail.com Brandon Long, TCS (850) 491-9625

COVER LETTER

AMENDMENT

FILING FEE, \$25.00 (check attached)

Name of Business: HOLLYWOOD HOTELS HOLDINGS LLC

Document Number: L25000074837

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COVER LETTER

Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

TO:

HOLLYWO	OOD HOTELS HOLDINGS (LLC			
SUBJECT:	Name of Lim	ited Liability Company	_		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Lior Raviv				
		Name of Person			
		Firm/Company			
	420 S Dixie Hwy				
		Address			
	Hallandale FL, 33009				
		City/State and Zip Code	_	202	
	LRAVIV@PRIMEHOMES		_ ,	2022 (1) 21	
		to be used for future annual report notification)		_	
For further information c	concerning this matter, please c	all:	1		
LIOR RAVIV		516 967-6717	• • • • • • • • • • • • • • • • • • • •	E:	
Name o	of Person	at () Area Code Daytime Telephone Num	ber ; i	26	
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certificational copy is enclosed) Certificational copy is enclosed)	Filing Fee icate of Sta ied Copy onal copy is er	itus &	
Mailing Addres		Street Address: Registration Section			
Registration S Division of C		Division of Corporations			
D O D (22		The Contra of Tallahaman			

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

on our records.)
12/2025 and assigned
<u>e</u> :
signation "LLC" or the abbreviation "L.L.C."
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625 44
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L Ali
cords, enter the name of the new registe
la street address

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.

City

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>	Type of Action
MGR	AVRAHAM BEN-SAADON	1851 NE 198 TER MIAMI 33179	■Add
			Remove
			□Change
			□Add
			□Remove
			Change
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Effective date, if other than the fan effective date is listed, the date in	ust be specific and cannot block does not meet the	e applicable statutory	or more than 90 days aft	tional) er filing.) Pursuant to 605.0207 nis date will not be listed as
Note: If the date inserted in this document's effective date on the				
document's effective date on the erecord specifies a delayed effect		ective time, at 12:01 a	a.m. on the earlier of:	(b) The 90th day after the
document's effective date on the erecord specifies a delayed effect rd is filed.	ive date, but not an effe		a.m. on the earlier of:	(b) The 90th day after the
document's effective date on the record specifies a delayed effect ord is filed.	ive date, but not an effe	25	a.m. on the earlier of:	