

M13000005307

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T Burch AUG 18 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HA200 PEC LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jorge Salcedo

Name of Person

Salcedo Attorneys at Law, P.A.

Firm/Company

200 S Biscayne Blvd. Suite 2700

Address

Miami, FL 33131

City/State and Zip Code

jsalcedo@lawjsh.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jorge Salcedo

Name of Person

at (**305**) **3750640**

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of
State: HA200 PEC LLC

2. Jurisdiction of its organization: Delaware

3. Date authorized to do business in Florida: 08/22/2013

SECTION II (4-7 complete only the applicable changes)

4. New name of the limited liability company: _____
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")


(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: _____

6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change: _____

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7. Attached is an original certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.



Signature of the authorized representative

Brett R. King
Vice President

Typed or printed name of signee

Filing Fee: \$25.00

Address: Hunkins Waterfront Plaza, Suite 356, Main Street
Charleston, NC 29401

FILED
14 AUG 11 PM 5:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA