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(Re	equestor's Name)			
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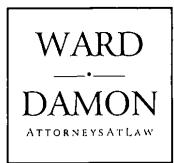
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4420 BEACON CIRCLE WEST PALM BEACH, FL 33407

Tel: (561) 842-3000

Direct Dial: (561) 594-1452

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Michael J Posner, Esquire Michael J Posner, P.L. Board Certified Real Estate Attorney mjposner@warddamon.com

September 2, 2021

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

Re: HH Tiffany Investments LLC

Dear Sir/Madam:

The enclosed application, certificate and fee of \$25.00 are submitted for filing. Please return all correspondence concerning this matter to the following:

Michael J Posner, Esq. 4420 Beacon Circle West Palm Beach, Florida 33407 mjposner@warddamon.com

For further information concerning this matter, please call:

Michael J Posner at (561) 594-1452

If you have any questions please feel free to contact me.

Very truly yours,

Mighael J Posner For the Firm MJP/sdh

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

1.

SECTION I (1-4 must be completed)

I. Name of limited liability Company as Department of State: <u>HH Tiffany Investr</u>	* *	f the Florida	
Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)	not applicable		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) not a	applicable		
2. The Florida document number of this lim		00002913	
3. Jurisdiction of its organization: <u>State</u>	of Delaware		
4. Date authorized to do business in Florida	i: March 12, 2021		
SECTION II (5-9 complete only the applicable of	changes)		
5. New name of the limited liability compar (must cont	ny: <u>not applicable</u> tain "Limited Liability Company, " "L.L	C.," or <u>"b</u> LC.")	
(If name unavailable, enter alternate name adopted for the copy of the written consent of the managers or managing me must contain "Limited Liability Company," "L.L.C." or "LL	embers adopting the alternate name. Th		
6. If amending the registered agent and/or r the name of the new registered agent and/or the			
Name of New Registered Agent:	not applicable		
New Registered Office Address:	not applicable		
	Enter Florida Street Address		
	, Florida	7: (2.1	
	City	Zip Code	
New Registered Agent's Signature, if changing R	egistered 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

- 7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: not applicable
- 8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

Title/ Capacity	Name	<u>Address</u>	Type of Action
Manager	Francisco Heffesse	1000 NW 57th Court, #1040 Miami, FL 33126	□Add √ Remove
Manager	Michael J Posner	4420 Beacon Circle West Palm Beach, FL 33407	□Add √ Remove
Manager	Gateway Real Estate LLC	1000 NW 57th Court, #1040 Miami, FL 33126	√Add □Remove

9. Attached is a 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

<u>Francisco Heffesse, Manager</u> Typed or printed name of signee