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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Div	ision of Corp	porations					
	Hagel Habit	tats, LLC					
SUBJECT:		ited Liability Company					
The enclosed	1 Articles of a	Amendment and fee(s) are sub	mitted for filing.				
Please return	all correspo	ndence concerning this matter	to the following:				
		Gary Hagel					
			Name of Person				
		Hagel Habitats					
	Firm/Company						
		6721 Precourt Drive					
	Address						
	Address Orlando, FL 32809						
			City/State and Zip Code				
		kel0815h@gmail.com					
For further is	iformation co	E-mail address: (oncerning this matter, please co	to be used for future annual report notification)				
Kelly Hagel							
	Name of	f Person	at (
Enclosed is a	check for th	e following amount:	111 01				
□ \$25.00 E	Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ Certificate of Status & Certified Copy (additional copy is enclosed)				
Re	iling Address	Section	Street Address: Registration Section				
Division of Corporations P.O. Box 6327			Division of Corporations The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hagel Habitats, LLC		
(<u>Name of the Limited Liabil</u> (A Florid	lity Company as it now appears on our records.) la Limited Liability Company)	
The Articles of Organization for this Limited Liability (Company were filed on 12/1/2023	and assigned
lorida document number L23000534913	·	-
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the lim	nited liability company here:	
he new name must be distinguishable and contain the words "Lir	mited Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
inter new principal offices address, if applicable:		<u> </u>
Principal office address MUST BE A STREET ADD	RESS)	
-		
		
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		2021 J.
		200 ECT.
. If amending the registered agent and/or registere	ed office address on our records, enter the	
gent and/or the new registered office address here:		, Ö
		P
Name of New Registered Agent:		ကြောင့်
		PA 46
New Registered Office Address:	Enter Florida street address	ni O'
	Florid:	7 in Code
	(111)	in 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 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>	Address	Type of Action
AMBR	Jeffrey Hagel	PO Box 6247	Add
		Brandon, FL 33508	□Remove
			■Change
AMBR	Kelly Hagel	PO Box 6247	■ Add
		Brandon, FL 33508	Remove
			Change
			□Add
			□Remove □□Change
			Zi DAdd
			Remove
			☐ Change
			□Add
			□Remove
			□Change
			□Add
			Remove

AMBR.								
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effective date is listed, the te: If the date inserted	date must be spec	ific and car	inot be prior to	o date of filing o	or more than 90	days after filing	g.) Purs <mark>uant</mark> j	0 605 b
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cord specifies a delayed	l effective date. I	but not an	effective tin	ne, at 12:01 a.	m. on the ear	lier of: (b) T	he 90th day	after
s filed.								
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Filing Fee: \$25.00