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SECRETARY OF STATE

C. LEWIS
FEB 1 5 2013
EXAMINER



Daytona Beach • DeLand

GLENN D. STORCH, ESQUIRE GLENN D. STORCH, P.A.

420 South Nova Road
Daytona Beach, Florida 32114
(386) 238-8383
(386) 238-0988 (fax)
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TY HARRIS, ESQUIRE
TY HARRIS, P.A.
112 W. New York Ave., Ste. 211
DeLand, Florida 32720
(386) 624-6904
(386) 624-6906 (fax)
tyharrispa@gmail.com

February 11, 2013

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

Re:

Articles of Amendment for HLC Management , LLC

Articles of Amendment for OSW Management, LLC

Dear Sir or Madam:

In reference to the two above mentioned limited liability companies, please find enclosed signed Articles of Amendment for filing with the State of Florida, along with our check in the amount of \$50 (fee of \$25 per amendment) for these filings.

If all is in order please file at your earliest convenience. If you have any questions, please do not hesitate to contact my office.

Thank you for your courtesies. ,

Glenn D. Storc

indest regards,

Enclosures.

:cat

1275-100 1275-90

COVER LETTER

TO: Registration Section
Division of Corporations

HLC MANAGEMENT, L.L.C.

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Glenn D. Storch, Esquire

Name of Person

Storch & Harris, LLC

Firm/Company

420 South Nova Road

Address

Daytona Beach, FL 32114

City/State and Zip Code

glenn@storchlawfirm.com

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

For further information concerning this matter, please call:

Glenn D. Storch, Esquire

_{.,}386 \238-8383

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

2013 FEB 14 AM 7: 26

Zip Code

(Name of the Limited Liability Company as it now app (A Florida Limited Liability Company)	pears on our records.) 1y)
The Articles of Organization for this Limited Liability Company were filed on Florida document number L0200005073	10/05/11 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company	here:
The new name must be distinguishable and end with the words "Limited Liability Co"L.L.C."	mpany," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address or registered agent and/or the new registered office address here:	on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	TD 4.1

New Registered Agent's Signature, if changing Registered Agent:

HLC MANAGEMENT, L.L.C.

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 608, 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 Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	LCS MANAGEMENT, L.L.C.	P.O. BOX 1500, New Smyrna Beach, FL 32170	Add
			Remove
MGRM	HART LAND & CATTLE, INC.	138 S. State Road 415, New Smyrna Beach, FL 3216	8 Add
			Remove
	······································		Add
			Remove
·			Add
			Remove
			Add
			Remove
			Add Remove

D. Į	amending any other information, enter change(s) here: (Attach additional sheets, if necessar	y.) _{SE} IIVIS	FILE CRETARY ON OF CO	ED Or ()RPO	STATE PATIONS
	2	013 F	EB 14	AM	7: 26
			-		
	2-6-13		-		
Date	Robert L. Hout				
	Signature of a member or authorized representative of a member				
	Robert L. Hart				•
	Typed or printed name of signee				

Page 3 of 3

Filing Fee: \$25.00