L10006074147

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SECRETARY OF STATE ALLAHASSEE, FLORIDA

T. HAMPTON

DEC 3 0 2011



COVER LETTER

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Registration Section
Division of Corporations

* 3				
SUBJECT:	HV	Cloud, LLC		
Name of Limited Liability Company				
The analogad Audislaw of	A d d d d			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing,		
Please return all correspo	ondence concerning this matter	to the following:		
	Joe F. Solsona			
Name of Person				
HV Cloud, LLC				
Firm/Company				
4045 T O . V . 440				
1845 Town Center Suite 110				
Address				
Fleming Island, FL 32003				
City/State and Zip Code				
Joe@sunmarkusa.com				
	E-mail address: (to be used for future annual report notifica	ition)	
For further information c	oncerning this matter, please c	all:		
Je.	oe Solsona	at (904) 3	94-3904	
	f Person	at (904) 3 Area Code & Daytime 7	Telephone Number	
England in a short found	or Caller			
Enclosed is a check for th	•			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy	\$60.00 Filing Fee, Certificate of Status &	
	certificate of Status	(additional copy is enclosed)	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 FILED OF 2011 DEC 28 AM 11: 0.3

SEURL TARY OF STATE (Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company) 07/14/2010 and assigned The Articles of Organization for this Limited Liability Company were filed on L10000074147 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: U2 Cloud, LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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 on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida 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 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

Zip Code

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

MGR = Manager

MGRM = Managing Member **Title** <u>Name</u> **Address** Type of Action ☐ Add ☐ Remove ☐ Add Remove . ☐ Add Remove Remove \square Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) December 20 2010 Dated ___ Signature of a member or authorized representative of a member Joe Solsona Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00