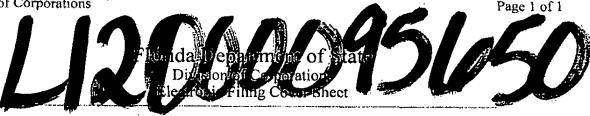
Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000291468 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : CALANDRINO LAW FIRM

Account Number : I20090000062

Phone

: (407)601-4905

Fax Number

: (407)601-4910

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HBC FACILITIES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

BRUCE

Electronic Filing Menu

Corporate Filing Menu

DEC 13 2012

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

HBC Facilities, LLC

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:

Emily C. Johns

Name of Person

Calandrino Law Firm, P.A.

Firm/Company

301 E. Pine St., Ste. 950

Address

Orlando, FL 32257

City/State and Zip Code

amy@floridabusinesslaw.com

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

For further information concerning this matter, please call:

Emily C. Johns

_{ar} 407 601-4905

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 OFF 12 MIN:

AND

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HBC Facilities, LLC		
(Name of the Limited Liability Compar (A Florida Limited L	ny as it now appears on our reco lability Company)	rds.)
The Articles of Organization for this Limited Liability Company Florida document number L12000095650	were filed on 07/23/2012	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Company," the design	nation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	1540 International Park	way, Suite 2000
(Principal office address MUST BE A STREET ADDRESS)	Lake Mary, Florida 3274	16
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		12 DEC 2 SECILETARY TALLAHASS
B. If amending the registered agent and/or registered office address here	ice address on our records, ; :	enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida str	vat addunn
	Linei Piorida sir	eer address
***************************************	City, Flor	rida Zip Code
New Designated Agent's Signature If shanging Begintered Agent.	-	mp wood

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.

If Changing Registered Agent, Signature of New Registered Agent

12/12/2012 15:26

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 = M MGRM =	anager Managing Member			
<u>Title</u>	Name		Address	Type of Action
		-		Add
				Remove
		-		Add
				Remove
		•		
		_		Add
				Remove
				T _A C ₃
				LCUAFE CRE
		-		FILED
				Li-Remove 133
				COMID SIVIE ID: 41
		_		Add
				Remove
				Add
		-		
				Remove

. "	The special section of the section o						
r							
e*	Ċ						
				• •		<u> </u>	
ed D	ecember	12	2012		, r		
-	Alle	1.6	1.		-	•	
. 6.	7	-	f a member or a	thorized repre	sentative o	f a member	7
	. Philip K. C	alandrino		•		•	•

Page 3 of 3

Filing Fee: \$25.00