

# 5/20/2014  
M1400003163

Division of Corporations  
Florida Department of State  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.  
Account Number : 110432003053  
Phone : (561) 694-8107  
Fax Number : (561) 694-1639

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

Email Address: \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
HH GULFSTREAM LAND HOLDINGS, LLC**

Certificate of Status	0
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Page Count	03
Estimated Charge	\$25.00

K. SALY  
EXAMINER

MAY 21 2014

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

**SECTION I (1-3 must be completed)**

1. Name of limited liability Company as it appears on the records of the Florida Department of State: HH Gulfstream Land Holdings, LLC

2. Jurisdiction of its organization: Delaware

3. Date authorized to do business in Florida: May 8, 2014

**SECTION II (4-7 complete only the applicable changes)**

4. New name of the limited liability company: \_\_\_\_\_  
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

\_\_\_\_\_

6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change: Adding HHG Land Holdings, LLC as member.

Removing HH GULFSTREAM LLC as member.

7. Attached is an original 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.

Jessica Morales

Signature of the authorized representative

Jessica Morales, Attorney in Fact

Typed or printed name of signer

**Filing Fee: \$25.00**

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