

Florida Department of State  
Division of Corporations  
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# L01600001355

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To:

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

From:

Account Name : DUSS, KENNEY, SAFER, HAMPTON & JOOS, P.A.  
Account Number : I20090000089  
Phone : (904) 543-4300  
Fax Number : (904) 543-4301

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

Email Address: veummas@jaffm.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
2759 WEST FIFTH STREET, L.L.C.

Certificate of Status	0
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TALLAHASSEE, FLORIDA

SEP 21 2015  
J. HARRIS

H15000225406

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

2759 WEST FIFTH STREET, L.L.C.

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 1.25.2001 and assigned  
Florida document number L01000001355

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 contain 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)

P.O. BOX 1893

LYONS, COLORADO 80540

2005 SEP 18 AM 8:50  
SECRETARY OF STATE  
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**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

Florida

City

Zip 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 Changing Registered Agent, Signature of New Registered Agent

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>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
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Dated 9.18 2015

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

JOHN S. DUSS, IV, VICE PRESIDENT OF HRH HOLDINGS, INC., MANAGING MEMBER

Typed or printed name of signee

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