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D. BRUCE

OCT 6 2011

EXAMINER

COVER LETTER

TO:	Registration S Division of Co						
SUBJE	ECT:	OSW Ma	nagement, L.L.C.				
			ited Liability Company				
The en	closed Articles of	Amendment and fee(s) are su	bmitted for filing.				
Please	return all correspo	ondence concerning this matte	r to the following:				
			Glenn D. Storch, Esq.				
			Name of Person				
G			Glenn D. Storch, P.A.				
	Firm/Company 420 S. Nova Road						
			Address				
	Daytona Beach, FL 32114				홀승	===	
		,	City/State and Zip Code		LAH LAH	8	٠.
		E-mail address:	to be used for future annual report notif	fication)	IAR	<u>-</u> 2	**************************************
For fur	ther information of	concerning this matter, please	call:		EE' F		
	Gle	enn D. Storch	at (386) 23	88-8383 xt 11	S IAT	至20	*****
		of Person		ne Telephone Number	N N	نده	
Enclose	ed is a check for t	he following amount:					•
S25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			\$55.00 Filing Fee & Certified Copy (additional copy is enclosed	d) Certified	e of Status		ed)
		ration Section on of Corporations ox 6327	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited (A	SW Management, L.L.C. Liability Company as it now appear Florida Limited Liability Company)	s on our records.)							
The Articles of Organization for this Limited Li Florida document number L01000019		11/13/2001	and assigned						
This amendment is submitted to amend the follo	owing:								
A. If amending name, enter the new name of	the limited liability company here	<u>e</u> :							
The new name must be distinguishable and end wit L.L.C." Enter new principal offices address, if applications is applicated to the control of the control o		ny," the designation "l	LC" or the abbreviation						
Principal office address MUST BE A STREE			5						
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE I	ROX		1 OCT -5 PM 2: 03						
Muning undress mill DD / 1 1 051 01 1 1 0 1			2: D						
3. If amending the registered agent and/oregistered agent and/or the new registered of		ur records, <u>enter t</u>							
Name of New Registered Agent:	Name of New Registered Agent: Glenn D. Storch, Esq., Glenn D. Storch, P.A.								
New Registered Office Address:	420 S. Nova Road								
	Enter Florida street address								
	Daytona Beach	, Florida	32114						
	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 producties, 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 so firm that the limited liability company has been notified in writing of this change.

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 HLC Management, LLC MGR P.O. Box 1500 ☐ Add New Smyrna Beach, FL 32170 ✓ Remove MGRM LCS Management, L.L.C. P.O. Box 1500 ✓ Add New Smyrna Beach, FL 32170 ☐ Remove ☐ Add Remove Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) September 6 2011 Dated _ Signature of a member or authorized representative of a member Robert L. Hart Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00