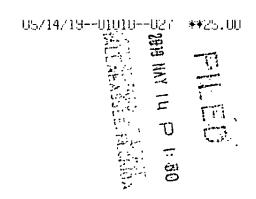
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## COVER LETTER

ТО:	Reg Divi	istration Session of Cor	ction porations		•	•	,
CHD IEA	car.	HANGAR,	LLC				
SUBJEN	CI			Name of Lin	nited Liability Company		
The encl	losed	Articles of	Amendment and	fee(s) are sub	omitted for filing.		
Please re	eturn	all correspo	ndence concerni	ng this matter	to the following:		
			GERRY AL	EXANDER			
					Name of Person		
			HANGAR, I	LLC			
				<u></u>	Firm/Company		
			710 NORTH	DRIVE			
					Address		<del></del>
			MELBOUR	NE, FLORID	A 32934		
					City/State and Zip Code		·
				-mail address:	to be used for future annual	report notifies	tion)
For furth	ner in	formation co	oncerning this m			Tepart manifes	,
		EXANDER	·	,		31-8450	
		Name of	`Person		at () Area Code	Daytime T	elephone Number
Enclosed	d is a	check for th	e following amo	 			
\$25.	.00 Fi	ling Fee	□ \$30.00 Fili Certificat	ing Fee & le of Status	S55.00 Filing Fee of Certified Copy (additional copy is end		□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Registra Division P.O. Bo	NG ADDRESS ttion Section n of Corporation ox 6327 ssee, FL 32314	1	Registrat Division Clifton L 2661 Exc	tion Section of Corporati	r Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

HANGAR, LLC

(Name of the Limit	ted Liability Compan (A Florida Limited L	iy as it now appears on iability Company)	ownercottys) II 🗦 1: 20
The Articles of Organization for this Limited L Florida document number L02000005005	iability Company v	were filed on 28-FEI	BRUARY 2002 and assigned
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liabil	lity company here:	
The new name must be distinguishable and contain the v	vords "Limited Liabili	ty Company, the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic			
(Principal office address MUST BE A STREE	TADDRESS)		<del>-</del>
Enter new mailing address, if applicable:		710 NORTH DRIVE	<b>:</b>
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	MELBOURNE	
		FLORIDA 32934	
B. If amending the registered agent and/ registered agent and/or the new registered of			r records, <u>enter the name of the nev</u>
Name of New Registered Agent:	DANIEL SCHW	/INN	
New Registered Office Address:	710 NORTH DR	RIVE	
		Enter Florida sa	treet address
	MELBOURNE	<u> </u>	, Florida 32934
		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>	Type of Action
MGRM	SCHWEITZER, TODD	3030 N. ROCKY POINT DRIVE. WEST, SUITE 800	🛱 Add
		TAMPA	
			□ Remove
		FLORIDA 33607	Change
MCDM	HALEY, MYRA	7640 N. WICKHAM RD., #101B	
MGRM		-	
		MELBOURNE	
			■ Remove
		FLORIDA 32940	<b>5</b> ci
			Change
			Add
			Remove
		<del></del>	Change
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			Change
		<del>-</del>	Add
			☐ Remove
			☐ Change

). If am	ending any other inform	nation, enter change(s) here: (Attach additional sheets, if necessary.)
		<u> </u>
		•
	·	
Note:	If the date is listed, the date in	he date of filing:
	cord specifies a delaye e 90th day after the re	ed effective date, but not an effective time, at 12:01 a.m. on the earlier of: ecord is filed.
r~ -	MAY 03	2019
Dated	$\overline{\Omega}$	
		Signature of Ameripoer or authorized representative of a member
	DANIEL SCHWINN	
		Typed or printed name of signee
		Page 3 of 3

Filing Fee: \$25.00