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COVER LETTER

		_	COVERLETTER		
	gistration Se vision of Cor				
SUBJECT:	Hybrid Ente	erprises L.L.C			
Sobster.		Name of Lim	nited Liability Company		
The enclosed	l Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
			Jeanine Chin		
			Name of Person		
			Hybrid Enterprises L.L.C		
			Firm/Company		
		227	7 N. John Young Parkway, Suite B		
			Address		
			Kissimmee, FL 34741	÷,	
			City/State and Zip Code		
			eanine.chin@22hybrid.com	\$ G	
		E-mail address: (to be used for future annual report notific	ration)	
For further in	nformation e	oncerning this matter, please c	all:	E 7	:
	Jeanine	Chin	954 483-6339 at ()		ン
	Name o	f Person	Area Code Daytime	Telephone Number 5	
Enclosed is	a check for th	ne following amount:			
□ \$25.00 F	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 of 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

riyond emerprises L.L.C	T			
(<u>Name of the Limited Li</u> (A Fl	antity Compa- lorida Limited I	ny as it now appears o Liability Company)	n our records.)	
The Articles of Organization for this Limited Liabili Florida document number	ity Company	were filed on2/1	3/2003	and assigned
This amendment is submitted to amend the followin	ıg;			
	-	10.a b		
A. If amending name, enter the new name of the	amited Habi	mty company nere	; -	
The new name must be distinguishable and contain the words	"Limited Liabil	ity Company," the desi	gnation "LLC" or the a	bbreviation "L.L.C."
·			g Parkway, Suite B	
Enter new principal offices address, if applicable		Kissiminee, FL 34		
(Principal office address MUST BE A STREET AL	<u>DDKESS)</u>			
r		227 N. John Youn	g Parkway, Suite B	
Enter new mailing address, if applicable:	v.	Kissimmee, FL 34741		
(Mailing address MAY BE A POST OFFICE BOX	<u>v</u>			
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:	address here	<u>e</u> :		the name of the ne
New Registered Office Address: 2.	27 N. John Yo 	ung Parkway, Suite I	street address	
K	issimmee	<u> </u>		3.1741
<u> </u>		City·	, Florida _	Zip Code
New Registered Agent's Signature, if changing Regis	stered Agent:		ÿ. L.	22
I hereby accept the appointment as registered ag provisions of all statutes relative to the proper an accept the obligations of my position as registere being filed to merely reflect a change in the regis company has been notified in writing of this chan	nd complete	performance of m	y duties, and Lam	familiar with and

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>	Address	Type of Action
CEO	Jeanine Chin	227 N. John Young Parkway	Add
		Suite B	□ Remove
		Kissimmee, FL 34741	Change
MGR Cory	Cory L. Chin	227 N. John Young Parkway	
		Suite B	_ □ Remove
		Kissimmee, FL 34741	■ Change
			□ Ad d
		☐ Remove	
			☐ Change
			Add
			☐ Remove
			Change
			D Add
			Remove
			C Change
			□ Add
			☐ Remove
			Change

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on effective date is listed, the date must be determined in this blocument's effective date on the D	lock does not meet the applica	to date of filing or more truble statutory filing req	uirements, this date v	will not be listed a
			<u> </u>	
record specifies a delayed The 90th day after the rec		an effective time	, at 12:01 a.m. (on the earlier of the control of the
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October 17	2017	<u></u> ·		
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Typed or printed name of signee

Filing Fee: \$25.00