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To:

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

From:

Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC
Account Number : T20070000020
Phone : (813) 435-3176
Fax Number : (713) 429-1276

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
HUTCHINS INVESTMENT CORPORATION, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

BRUCE
AUG 08 2017

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

HUTCHINS INVESTMENT CORPORATION, LLC
(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 12/17/2003 and assigned
Florida document number L03000053822.

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)

8319 NATCHEZ STREET
TAMPA, FL 33637

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

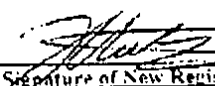
8319 NATCHEZ STREET
TAMPA, FL 33637

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: JULIAN A. HUTCHINS
New Registered Office Address: 8319 NATCHEZ STREET
Enter Florida street address
TAMPA, Florida 33637
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

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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>
MGR	ROBERT J HUTCHINS	7504 RIVER RIDGE DR.	☐ Add
			☐ Remove
		TAMPA, FL 33637	☐ Change
AMBR	JULIAN A. HUTCHINS	8319 NATCHEZ STREET	☒ Add
			☐ Remove
		TAMPA, FL 33637	☐ Change
			☐ Add
			☐ Remove
			☐ Change
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			☐ Remove
			☐ Change

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

2017 AUG -7 P 12:11
SHERIFF'S OFFICE
TALLAHASSEE, FLORIDA

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated 08.02 2017

705

Signature of a member or authorized representative of a member

ROBERT J HUTCHINS

Typed or printed name of signee

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