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T. HAMPTON APR 1 0 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: HBM Investi	mente 11.0
(Nan	newts UC ne of Limited Liability Company)
The enclosed Articles of Amendment and fee(	s) are submitted for filing.
Please return all correspondence concerning the	is matter to the following:
Yoran	n Ben-Annaun. (Name of Person)
	(Name of Person)
	(Firm Company)
21121 1	(Address)
	(Address)
North M	(City State and Zip Code)
For further information concerning this matter,	please call:
	at (305) 527-7802 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$30.00 Filing Fe Certificate of	
MAILING ADDRESS: Registration Section Division of Corporations	STREET/COURIER ADDRESS: Registration Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE SECRETARY OF STATE SECRETARY OF STATE STATE SECRETARY OF SECRETARY OF

HB4 Investments LLC	<b>.</b> 9	₹' * *. ^
(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	and assigne	:d
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 end with the words "Limited Liability Company," the designation "LLC" 'L.L.C."	or the abbro	—— viațion

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:

[1150 new principal and Mailing Address]

New Registered Office Address:

(Enter Florida street address)

Worth Mix mi Beach, Florida 33179

(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 608, 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 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

<u>le</u>	<u>Name</u>	Address	Type of Actio
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f amen	ding any other information, enter chang	e(s) here: (Attach additional sheets, if necessor	ary.)
	Address of MGRM	Yoran Ben Ammun al address:	30
_	changed to the new	aldress!	
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_			SECRE VISION )8 APR
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ed	<u>4/6/08                                   </u>	 	OF STATE ORPORATION PM 12: 29
	Foeth Mac C	or authorized representative of a member	
	3.8	or aumorized representative or a monitor	0,

Page 2 of 2

Filing Fee: \$25.00