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Page Count	05
Estimated Charge	\$60.00

Electronic Filing Menu

Corporate Filing Menu

COVER LETTER

SUBJECT: Hannah 8	Dunn, LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Daniel Connelly		
		Name of Person	
	Hogan Lovells US LLP	Fign/Company	····
		- ,	,
	100 International Drive,	Suite 2000 Address	
	Baltimore, MD 21202		
	dunist assumelly. The monte	City/State and Zip Code	
	daniet.connelly@hoganic E-mail address: (to be used for future annual report notif	ication)
For further information	concerning this matter, please o	all:	
Daniel Connelly	of Person	nt (410) 659-5073 Area Code Davtime	Telephone Number
Name	or r Craore	Aleg Code Bayanic	· · · · · · · · · · · · · · · · · · ·
Enclosed is a cheek for t	the following amount:		
Enclosed is a check for a □ \$25.00 Filing Fee	the following amount: \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate Cortified Co
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status LING ADDRESS:	Certified Copy (additional copy is enclosed) STREET/COURI	Certificate of Certified Contact (additional contact) ER ADDRESS:
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6/20/2016 10:19:43 AM From: To: 8506176383(3/5)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hannah & Dunn, LLC		····
(Name of the Limited Liability Comps (A Florida Limited	nny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 06/14/2005	and assigned
Florida document number L05000058656		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ollity company here:	
Hannah and Dunn, LLC		
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		로는 중
		ART W
Enter new mailing address, if applicable:		20 <u>1</u> 20
(Mailing address MAY BE A POST OFFICE BOX)		
		R :-
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	ffice address on our records, <u>en</u> <u>e</u> :	ter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
THE THE STATE OF T	Enter Florida street address	
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	L	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I a provided for in Chapter 605, F.S. (m familiar with and Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

6/20/2016 10:19:43 AM From: To: 8506176383(4/5)

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 Title Name Address Type of Action □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change _□ Add _□ Remove ☐ Change _□ Add □ Remove _☐:Change SSEF ___Remove S Change □ Add □ Remove

if attending any other unformation, enter change(s) here. (Attach daditional sheets, y he	occura, y.y
Effective date, if other than the date of filing: July 1, 2016(or	otional)
f an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days at Note: If the date inserted in this block does not meet the applicable statutory filing requirements, to document's effective date on the Department of State's records.	fter filing.) Pursuant to 605,0207
e record specifies a delayed effective date, but not an effective time, at 12:03. The 90th day after the record is filed.	1 a.m. on the earlier of
	<u> </u>
Dated June (c 2016	
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Signature of a member of authorized representative of a member	O CONTRACTOR OF THE CONTRACTOR
Lee F. Hager, Manager	
Typed or printed name of signee	9 13

Page 3 of 3

Filing Fee: \$25.00