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COVER LETTER

Registration Section Division of Corporations

TO:

	Name of Lin	ited Liability Company		
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	ALEJANDRO PRICHAR	DO		
		Name of Person	 	
	ACCOUNTING CENTER	OF ORLANDO LLC		
		Firm/Company		
	1706 E SEMORAN BLVI	O STE 103		
	· · · · · · · · · · · · · · · · · · ·	Address		
	APOPKA, FL, 32703			
	 -	City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·	
	APICHARDO@ACCOUN	TINGORL.COM		
	E-mail address: (to be used for future annual report no	tification)	
For further information co	oncerning this matter, please c	all:		
ALEJANDRO PICHARDO		407 574-7340 at ()		
Name of Person		Area Code Daytir	ne Telephone Number	
Enclosed is a check for th	e following amount:			
□ \$25.00 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 & Certified Copy (additional copy is enclosed)	
Mailing Address Registration S Division of Co P.O. Box 632	ection orporations	Street Address: Registration So Division of Co	rporations	
Tallahassee, F		The Centre of 2415 N. Monre	pe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

EL CHILAR - HF, 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 $\frac{09/14/2007}{1}$ and assigned Florida document number ___L07000094220 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

_. Florida _

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
MGR	DEIRE RODRIGUEZ	644 N WEKIWA SPRINGS RD	≡ Add
		APOPKA, FL. 32712	□Remove
			□ Change
TREAS	MARTIN RODRIGUEZ JR	644 N WEKIWA SPRINGS RD	≡ Add
		APOPKA, FL., 32712	SECRETURE TALL A
			AHASSEE. FI
			PRemove
			□Change
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Fforting date if with an object the date of City				
ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of	f filing or more than 90 d			
lote: If the date inserted in this block does not meet the applicable stat ocument's effective date on the Department of State's records.	utory filing requireme	ents, this date will	not be !	listed as
record specifies a delayed effective date, but not an effective time, at 1	2:01 a.m. on the earlie	er of: (b) The 90)th day a	fter the
Lis filed.				
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ated 5/69/60 70				
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Pated $\frac{5/z9/20z_0}{}$				