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O9 MAY 28 PH 3: 25 SECRETANY OF STATE ALLAHASSEE, FLORIDA

B. KOHR

MAY 2 9 2009

EXAMINER



ACCOUNT NO. : I2000000195		
REFERENCE : 018194 118429A		
AUTHORIZATION: Spelle Reas		
COST LIMIT : \$ 25.00		
ORDER DATE: May 28, 2009 ORDER TIME: 9:28 AM ORDER NO.: 018194-010		
ORDER TIME: 9:28 AM		
ORDER NO. : 018194-010		
CUSTOMER NO: 118429A		
DOMESTIC AMENDMENT FILING NAME: HEADQUARTER ORLANDO, LLC		
EFFECTIVE DATE:		
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION		
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING		
CONTACT PERSON: Susie Knight EXT# 2956		
EXAMINER'S INITIALS:		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Headquarter Orlando, L	LC
(Name of the Limited Liability Company as it a (A Florida Limited Liability (ow appears on our records.) Company)
The Articles of Organization for this Limited Liability Company were fill Florida document number <u>L07000106027</u> .	
This amendment is submitted to amend the following:	ASSET OF PH
A. If amending name, enter the new name of the limited liability con	npany here: بي بي بين
	9E 8
The new name must be distinguishable and end with the words "Limited Liabi "L.L.C."	lity Company," the designation "LLC" on 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 addregistered agent and/or the new registered office address here:	ress on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
	(Enter Florida street address)
	. Florida
(City)	(Zin 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 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

MGRM = Managing Member

Title **Name Address Type of Action** Jeronimo Jose Esteve VP 5895 NW 167 Street Hialeah, FL 33015 ✓ Add Remove **□** Add Remove **□** Add 🗖 Remove □ Add Remove _ Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated ____ May 22 _____, 2009 Signature of a member or authorized representative of a member SEE ATTACHED SIGNATURE PAGE Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

and seal this 22 day of May, 2009 Signed, sealed and delivered HEADQUARTER ORLANDO HOLDING, INC. in the presence of: mo 2 Senice Signature of 1st Witness Jeronimo M. Esteve, III PRESIDENT Printed Name of 1st Witness Signature of 2nd Witness Printed Name of 2nd Witness