

## 107000127979

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## **COVER LETTER**

TO:	Registration Sec Division of Corp				
SUBJE	Hardy Burri	s, LLC			
Name of Limited Liability Company					
		Amendment and fee(s) are sub-			
r touse i	etan an correspon	Raymond C. Parker	to the following.		
		Dixie Southland Corpora	Name of Person		
Firm/Company 810 NE 20th Avenue					
Address Fort Lauderdale, FL 33304					
		ray@dixiesouthland.com	City/State and Zip Code		
For fur	ther information co	e-mail address: ( oncerning this matter, please of	to be used for future annual report notificall:	cation)	
Raym	ond C. Parker		954 768-0274		
	Name o	f Person	Area Code Daytime	Telephone Number	
Enclose	ed is a check for th	e following amount:			
\$2:	5.00 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 Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS: Registration Section

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hardy Burris, LLC		
(Name of the Limited Liability (A Florida	y Company as it now appears on our records Limited Liability Company)	<u> </u>
The Articles of Organization for this Limited Liability Co	007 and assigned	
Florida document number L07000127979	_·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ted 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 ADDR.	ESS)	<b>8</b>
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		<b>ယ</b> ရည
Enter new mailing address, if applicable:		<del>-</del> 237
• ••		<u>교 공</u> 유
(Mailing address MAY BE A POST OFFICE BOX)		<del></del>
B. If amending the registered agent and/or regist registered agent and/or the new registered office addr		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flor	rida
<del></del>	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

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>	Name	<u>Address</u>	Type of Action
MGR	Dixie Southland Corporation	810 NE 20th Avenue Fort Lauderdale, FL 33304	<b>=</b> Add
			Remove
	Lakocido Rooch Comerchina	810 NE 20th Avenue	Change
MGRM	Lakeside Ranch Corporation	Fort Lauderdale, FL 33304	
			Remove
	<del></del>		D Add
			Remove
			Change
	<del></del>	<del></del>	Add
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Effective date, if other than the da (If an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Depa	e specific and cannot be prior to c does not meet the applicab	date of filing or more than le statutory filing require	(optional) 90 days after filing.) Pursuant to 60 ements, this date will not be lis	5.0207 ( ted as t
the record specifies a delayed e	ffective date, but not a dis filed.	an effective time, a	t 12:01 a.m. on the earl	ier of:
The 90th day after the record				
The 90th day after the record	2018	. •		
The 90th day after the record	2018  An Free - gnature of a member or authorit	zed representative of a mer	nber	

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Filing Fee: \$25.00