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EXAMINER

COVER LETTER

TO:		stration S ion of Co	ection rporations		•
SUBJI	ECT:	HFPMA	Name of Lin	nited Liability Company)	
The en	closed	Articles of	f Amendment and fee(s) are sul	bmitted for filing.	
Please	return a	all corresp	ondence concerning this matter	r to the following:	
			WENDY HARVEY	(Name of Person)	
				(Name of Ferson)	
			HFPMA, LLC	(Firm/Company)	
	26 S. BROOKSVILLE AVE				
				·	
	BROOKSVILLE, FL 34601 (City/State and Zip Code)				
For fu	rther inf	formation ·	concerning this matter, please		2001 HAR - SECRETAL TALLAHAS
JOS	EPH 9	SELWA	Y	at (352) 799-8070	50 ⁷²
			of Person)		Telephone Number) TOP PRINT OF
Enclos	ed is a	check for	the following amount:		
₹ \$25	5,00 Fil	ing 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)
		MAII	LING ADDRESS:	STREET/COURIE	R ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited	Liability Company as it now appears on our A Florida Limited Liability Company)	records.)
The Articles of Organization for this Limited L	iability Company were filed on 01/17/08	and assigned
Florida document number <u>L08000006600</u>	·	
This amendment is submitted to amend the foll	owing:	
A. If amending name, enter the new name o	f the limited liability company here:	
The new name must be distinguishable and end wi "L.L.C."	th the words "Limited Liability Company," the	_
B. If amending the registered agent and/ registered agent and/or the new registered or	or registered office address on our reco ffice address here:	ASSE STATE
Name of New Registered Agent:	JOSEPH SELWAY FAMILY, LLC	PH IZ
New Registered Office Address:	26 S. BROOKSVILLE AVE (Enter Flor	rida street address)
	BROOKSVILLE	, Florida 34601
	(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

HEPMA LLC

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

MGRM = Managing Member <u>Address</u> **Type of Action Title Name** EXPLORER INVESTMENT, UC 26 S. BROOKSVILLE AVE MGR ☐ Add BROOKSVILLE FL 34601 JOSEPH SELWAY FAMILY 1 LC 26 S. BROOKSVILLE AVE MGRM √ Add Remove MGRM. MGRM WALZ STABELS, LLC 7202 PERIWINKEL CT **✓** Add **BROOKSVILLE, FL 34602** Remove Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member JOSEPH SELWAY Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00