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M. THOMAS

JUN - 2 2009

EXAMINER

COVER LETTER

	tration Section on of Corporations	
SUBJECT: _		evelopment LLC
		mited Liability Company
	articles of Amendment and fee(s) are	-
Please return a	Il correspondence concerning this made	tter to the following:
		Neil Monney
		Name of Person
		H R Development LLC
		Firm/Company
		49 shoreland Dr.
		49 shoreland Dr. Address Key Largo Fl. 33037
		H R Development LLC Firm/Company 49 shoreland Dr. Address Key Largo Fl. 33037 City/State and Zip Code ian@mrdf.org
		City/State and Zip Code
	E-mail addres	ian@mrdf.org s: (to be used for future annual report notification)
For further info	ormation concerning this matter, pleas	e call:
	Neil Monney	at (305 _a) 451 3388
Name of Person		Area Code & Daytime Telephone Number
Enclosed is a c	heck for the following amount:	
\$25.00 Filin	rg Fee \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section		STREET/COURIER ADDRESS: Registration Section

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

HR Development 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 Lia Florida document number <u>LO9000</u>		re filed on <u>APQ 1</u>	<u>13,200</u>) 9 and assigned		
This amendment is submitted to amend the follow	wing:					
A. If amending name, enter the new name of	the limited liability	company here:	Ē	2009		
The new name must be distinguishable and end with "L.L.C."	the words "Limited	Liability Company," th	ne designation "Ľ	LC" or the abbreviation		
Enter new principal offices address, if applica	ble:		· · · · · · · · · · · · · · · · · · ·	55.52		
(Principal office address MUST BE A STREET ADDRESS)						
	_			OF T		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B						
B. If amending the registered agent and/or registered agent and/or the new registered offi		address on our re	ecords, <u>enter t</u>	he name of the new		
Name of New Registered Agent:	Neil Monney		·			
New Registered Office Address:	49 Shoreland Dr.					
11911 Hogipping Ville Hamos.	Enter Florida street address					
	Key Largo		, Florida	33037		
		ity		Zip Code		
New Registered Agent's Signature, if changing Re	egistered Agent;					
I hereby accept the appointment as registered the provisions of all statutes relative to the pro- accept the obligations of my position as regist being filed to merely reflect a change in the re company has been notified in writing of this co	oper and complete ered agent as prov gistered office add hange.	performance of my vided for in Chapter	duties, and I at 608, F.S. Or, if that the lim	m familiar with and if this document is		

Page 1 of 2

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 **Type of Action** <u>Address</u> <u>Title</u> Name IAN KOBLICK AND TONYA 44 Shoreland Drive -MGRM-Key Largo, Florida 33037 ₩ Add MGRM Ian G. Koblick and Tonya 49 Shoreland Drive Remove Key Largo, Florida Koblick, Trustees for the Tonya A. Koblick Revocable Trust dated September 5, 1990 ☐ Add Remove MGRM_ Jullin Monney 49 Shoreland Drive Key Largo, Florida 33037 Remove EAdd = Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated MAY 5 Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00