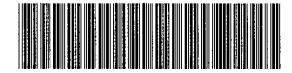
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SECRETARY OF STATE

J. BRYAN

JUL 13 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: HART Capital Management, LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	TAL SE
Tyler Tedrow Name of Person	SECRETARY OF STATE
HART Capital Management, LLC	HIZ: 48 EFFLORIF
2350 Temple Dr Address	₩.
Winter Park, FL 32789 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Tyler Tedrow at (407) 644 - 0898 Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
(additional copy is enclosed) Certified	te of Status &

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



(Name of the Limited Liability Company as it how appears on our records.)

(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on ____5 / 4 / 3 00 9 and assigned Florida document number <u>LU9000043153</u>. 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 end with 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 City

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 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>Title</u> <u>Name</u> **Address Type of Action** Allrn, Tucker Allen, Tucker Mbrm 1584 Lake Knowles Cr. Add Winter Park, FL 32789 Remove 5353 Shea St., Apt 301 Add 0 clando, FL 32814 US Remove \square Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) 22 2009 Dated_ a member of authorized representative of a member Ted row
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00