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SECRETARY OF STATE

SECRETARY OF STATE

## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: BRAND HRD 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:	
Ann Banot  Name of Person	
Firm/Company  1737 DADTWIND AVE  Address  City/State and Zip Code  Yandrand @ gman.com  E-mail address: (to be used for future annual report notification)	THE D  2089 JUL 20 49 9: 43  SECRETARY OF STATE TALLAHASSEE FLORIDA
For further information concerning this matter, please call:	
Name of Person at (954) 445 - So 26  Area Code & Daytime Telephone Number	<u> </u>
Enclosed is a check for the following amount:	
(additional copy is enclosed) Certified C	e of Status &

#### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Taltahassee, 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

ROMBACA	LLC	
(Name of the Limited Liabi (A Florid	lity Company as it now appears or da Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Florida document number <u>LO900068</u>	y Company were filed on	16 2009 and assigned
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the l	imited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company,"	'the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET AD	DRESS)	-28 ASS
		mo a m
		FLOOR STA
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<b>&gt;</b>
B. If amending the registered agent and/or registered agent and/or the new registered office a		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter	Florida street address
	~.	, Florida
	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 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 **Type of Action** <u>Address</u> <u>Title</u> <u>Name</u> ☐ Add Remove ☐ Add Remove ☐ Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00