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J. BRYAN

SEP 28 2011

EXAMINER

COVER LETTER

TO: Registration Sec Division of Corp		
SUBJECT: HN	IVN LLC	e
	Name of Limited Liability Company	
		32 = m
The enclosed Articles of A	Amendment and fee(s) are submitted for filing.	SE SE
Please return all correspor	ndence concerning this matter to the following:	
	VIBHA SINGH	TILED MILLS
	HMUN LLC.	· · ·
	200 7230 US HWY 3	301S
	RIVERVIEW PL 33571 City/State and Zip Code	<u> </u>
	E-mail address: (to be used for future annual report notification)	
For further information con	ncerning this matter, please call:	
KAM	PATEL at (813) 443 4766	s ,
Name of	Person Area Code & Daytime Telephone 1	Number
Enclosed is a check for the	e following amount:	
≰ \$25.00 Filing Fee	Certificate of Status Certified Copy Certified Copy (additional copy is enclosed)	0.00 Filing Fee, ertificate of Status & ertified Copy dditional 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

HMVN LLC.		验至
	any as it now appears on our records.) Liability Company)	- Con
The Articles of Organization for this Limited Liability Compan	were filed on 7/29 2009	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and end with the words "Lim"L.L.C."	nited Liability Company," the designation "LLC"	' or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (<u>Mailing address MAY BE A POST OFFICE BOX)</u>	10875 COTY LAKE Tampa FL 3364	Dr. 7
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	ffice address on our records, <u>enter the r</u> re:	name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
 	, Florida	ip 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 Title **Name** Address Type of Action ☐ Add Remove ☐ Remove ☐ Add ☐ Remove Add Remove \square Add Remove \square 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 SINGH. Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00