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T. CLINE

EXAMINER

COVER LETTER

TO: Registration Section. Division of Corporations	
SUBJECT: Hummi Paltners 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:	
Daniel Stuzin	
Name of Person	
SF Partners Mortgage LLC.	
Firm/Company /	
Soo Douglas Rd. N. Twel Ste 500 PS = Address Address 72. 33134	
	Sec.
Stuz 11 @ sellsoth net E-mail address: (to be used for future annual report notification)	Paris of Paris of
For further information concerning this matter, please call:	
Daniel Stuzin at 305, 774 0454	
Name of Person Area Code & Daytime Telephone Number	
Please make the effective dute as of 6-22-2010	0
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$30.00 Filing Fee \$ \$55.00 Filing Fee \$ \$60.00 Filing Fee, Certificate of Status \$ Certified Copy (additional copy is enclosed) \$ Certified Copy (additional copy is enclosed)	
(additional copy is enviously	
MAILING ADDRESS: STREET/COURIER 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

Hummi Part	ners 1	ic.	1			
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now a	ppcars on	our records.) .		
(AT fortula Districted I	Linointy Comp					
The Articles of Organization for this Limited Liability Company	were filed or	1 <u> </u>	19-20	and assigned		
Florida document number <u>L0900080110</u>			•	,		
			:			
This amendment is submitted to amend the following:	٠,	•				
A. If amending name, enter the new name of the limited liat	oility compan	y here:	:	•		
Hummi, LLC.	:			•		
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability C	Company,"	the designation	on "LLC" or the abbreviation		
L.IC.				PER B		
Enter new principal offices address, if applicable:			•			
(Principal office address MUST BE A STREET ADDRESS)			•	FA N		
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				THE REAL PROPERTY.		
Enter new mailing address, if applicable:			•	LOS P		
(Mailing address MAY BE A POST OFFICE BOX)			- • • • • •	on o		
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B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		on our i	records, <u>ent</u>	er the name of the new		
	 -					
Name of New Registered Agent:	·	. ,	* ***	•		
New Registered Office Address:	<u>-</u>		<u></u> ,			
· · · · · · · · · · · · · · · · · · ·	Enter Florida street addr					
•	Florida					
	City		, FIULIUA :	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

MGR = Manager MGRM = Managing Member <u>Title</u> **Address** Type of Action Name -☐ Add Remove ☐ Add Remove ☐ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) ease make the effective 2010 Signature of a member or authorized representative of a member. Typed or printed name of signee

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:

Page 2 of 2

Filing Fee: \$25.00