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S. WARREN AUG 3 1 2017

## • COVER LETTER

TO:	Registration Sect Division of Corpo		•	*		
(12.122.222	HBARU, LL					
SUBJE	Name of Limited Liability Company					
The encl	losed Articles of A	mendment and fee(s) are subr	nitted for filing.			
Please re	eturn all correspond	dence concerning this matter t	o the following:			
		ALEJANDRO D GRAVIE	R			
			Name of Person	<del></del>		
		HLB GRAVIER LLP				
			Firm/Company			
		396 ALHAMBRA CIRCLE	E SUITE 900			
			Address	<del></del>		
		CORAL GABLES, FL 331	34			
			City/State and Zip Code			
		PRODRIGUEZ@HLBGRA	VIER.COM  o be used for future annual report notific			
For furth	ner information cor	ncerning this matter, please ca	·	жион)		
ALEJA	NDRO GRAVIER		at () 446-3022 Area Code Daytime			
Name of Person		Area Code Daytime	Felephone Number			
Enclosed	d is a check for the	following amount:				
<b>\$</b> \$25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional 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

HBARU, LLC.		
( <u>Name of the Limite</u>	d Liability Company as it now appears оп о A Florida Limited Liability Company)	ur records.)
The Articles of Organization for this Limited Lia llorida document number <u>L10000026027</u>		and assigned
his amendment is submitted to amend the follo		
a. If amending name, enter the new name of	the limited liability company here:	
he new name must be distinguishable and contain the wo	ords "Limited Liability Company," the designa	tion "LLC" or the abbreviation "L.L.C."
inter new principal offices address, if applica	ible:	
Principal office address MUST BE A STREE	T ADDRESS)	
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE E	<u></u>	
<ol> <li>If amending the registered agent and/o egistered agent and/or the new registered off</li> </ol>	•	records, enter the name of the
Name of New Registered Agent:		
	-	
New Registered Office Address:	Enter Florida str	eet 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 605, F.S. On, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the finited flubility company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Energy Capital Management and 🖨	c/o 396 Alhambra Circle Suite 900	<b></b> Add
	Consulting,	uc	
	,	Coral Gables, FL 33134	☐ Remove
			Change
MGR	GF Developers Group LLC	396 Alhambra Circle Suite 900	🗆 Add
		Coral Gables, FL 33134	■ Remove
			_ □ Change
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Filing Fee: \$25.00