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(Requestor's Name)				
. (Address)				
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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

AUG 3 1 2010

EXAMINER

COVER LETTER

то:	Registration S Division of Co		•	•			
SUBJECT: HQPPCSOLUTIONS.COM LLC							
Name of Limited Liability Company							
		ondence concerning this matter	_				
		·	·				
RONALD J DIETER Name of Person							
HQPPCSOLUTIONS.COM Firm/Company							
2400 NE 33RD AVE #109							
		,					
		FIL	AUDERDALE, FL, 33305 City/State and Zip Code				
		RONALD	DIETER08@COMCAST.	NET			
For fur	ther information	e-mail address: (to be used for future annual report no	tification)			
		-					
		ON DIETER of Person	at (954) Area Code & Dayt	258-8808 ime Telephone Number			
Enclos	ed is a check for	the following amount:					
▼\$ 25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclose	Section 1 Section 2 Sectio			
	Regis Divis P.O. 1	LING ADDRESS: tration Section ion of Corporations Box 6327 hassee, FL 32314	STREET/COU Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	porations Center Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HQPP	CSOLUTIONS.COM L	LC	
(<u>Name of the Limited Li</u>	ability Company as it now appea orida Limited Liability Company)	irs on our records.	. 22%
(711)	orida Emilica Elaomity Company)		9
The Articles of Organization for this Limited Liab	ility Company were filed on	APRIL1, 2010	SECRETARY ISSON OF CO 103AUG 30
Florida document number L100000351:	28		5 ≥ 20
Tronda document number	,		<u>ω</u> 9≥-
			- 6
This amendment is submitted to amend the follow	ing:		3 399
			1 28.
A. If amending name, enter the new name of the	<u>ne limited liability company he</u>	<u>re</u> :	
			
The new name must be distinguishable and end with t "L.L.C."	he words "Limited Liability Comp	eany," the designation "LLC"	" or the abbreviation
Enter new principal offices address, if applicab	le:		
(Principal office address MUST BE A STREET.	ADDRESS)		
Enter new mailing address, if applicable:			
	 	•	
(Mailing address MAY BE A POST OFFICE BO	<u></u>		
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		our records, enter the	manie of the nev
registered agent and/or the new registered offic	e address here.		
Name of New Registered Agent:			
New Registered Office Address:			
	E	nter Florida street address	I
		, 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	RAYMOND J PATTERSON	2400 NE 33RD AVE #109 FT LAUDERDALE, FL, 33305	Add Remove
			Add Remove
			Add Remove
			Add Remove
			□Add □Remove
			Add Remove
D. If amend	AUGUST 26 , 20 Signature of a member	D10	SECRETARY OF STATE DIVISION OF CORPORATIONS 10 AUG 30 PM 2: 58
		ALD J DIETER MGR I or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00