## L10000107512

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
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(Do	ocument Number)	<u>.                                    </u>
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## **COVER LETTER**

TO: Registration Se Division of Cor			
HDD'	YM LLC		
SUBJECT:		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Manuel A Ro	odriguez	
		Name of Person	
	HDDYM LLO		
		Firm/Company	
	6724 Hanley	/ Rd	
		Address	
	Tampa, FL 3	33634	
	lamara da asun arr	City/State and Zip Code	
	•	market@gmail.com to be used for future annual report notifi	ication)
For further information co	oncerning this matter, please ca	all:	
Manuel A R	Rodriguez	at (813 ) 882-94	497
Name o	Person		Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$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

## HDDYM LLC (Name of the Limited Liability Company as it now appears on our records.) The Articles of Organization for this Limited Liability Company were filed on 10/04/2010 and assigned Florida document number L10000103512 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida

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. 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

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'If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Manuel A Rodriguez	6724 Hanley Rd	<b>=</b> Add
		Tampa FL 33634	□ Remove
MGR	Fausto Peralta	6724 Hanley RD	 ■ Add
		Tampa FL 33634	□ Remove
P	Manuel A Rodriguez	6724 Hanley RD	
		Tampa FL 33634	■ Remove
VP	Fausto Peralta	6724 Hanley RD	 □ Add
		Tampa FL 33634	■ Remove
			☐ Add
			Remove
		7) 32 lbs.	
			☐ Remove

Correction from Vice President to N	Manager
Correction from Vice Freedom to N	lanagor
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Filing Fee: \$25.00