## 11000003622

(Pa	questor's Name)	
(r.e	questor s ivame)	
	d)	
(Adi	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
•	J	

Office Use Only



900250673329

08/16/13--01023--005 \*\*25.00

SECRETASY OF STATE

113 AUG 16 PM 1:4

AUG 1 9 2013 J. BRYAN

## **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT:

**HCR0011, 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:

Steven R. Amster

Name of Person

KODSI LAW FIRM, P.A.

Firm/Company

1855 Griffin Road, Suite A-370

Address

Dania Beach, FL 33004

City/State and Zip Code

samster@kodsilawfirm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steven R. Amster

,,954**,771-827**7

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the 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

HCR0011, LLC			
( <u>Name of the Limited</u> (A	Liability Compa Florida Limited L	ny as it now appears on our records iability Company)	
The Articles of Organization for this Limited Life Florida document number <u>L11000003622</u>	ability Company	were filed on 01/10/2011	and assigned
This amendment is submitted to amend the following	owing:		THE THE PERSON OF THE PERSON O
A. If amending name, enter the new name of	the limited liab	ility company here:	on "LLC" of the abbreviation
The new name must be distinguishable and end wit "L.L.C."	h the words "Limi	ted Liability Company," the designation	on "LLC" of the abbieviation
Enter new principal offices address, if application	able:	1855 GRIFFIN ROAD, SU	IITE A-370 🕏
(Principal office address MUST BE A STREET ADDRESS)		DANIA BEACH, FL 33004	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE I	BOX)		
B. If amending the registered agent and/or the new registered of			ter the name of the new
Name of New Registered Agent:			
New Registered Office Address:	1855 Griffin	Road, Suite A-370	
		Enter Florida street	address
	Dania Bead	h Florida	<sub>a</sub> 33004

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.

City

Zip Code

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

nager Managing Member		
Name	Address	Type of Action
		Add
		Remove
	<del> </del>	
		П
		Remove
		71.5
		SECTE TAKE Add Remove
		SS Remov
		SS Remove
		Add
		Remove
		Remove
		Add
		Remove
		Add
		Remove
	Managing Member	Managing Member

). If amending any other informa	ation, enter change(s) here: (Attach additional sheets, if ne	cessary.)
• • •		<u></u>
August 12	2013	
Sig	gnature of a member or authorized representative of a member	
Steven R. Ams	ster, Authorized Representative	
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00

2018 AUG 16 PH 1:4