L110000011701

| (Requestor's Name) | | | | | |
|---|--|--|--|--|--|
| (Address) | | | | | |
| (Address) | | | | | |
| (City/State/Zip/Phone #) | | | | | |
| PICK-UP WAIT MAIL | | | | | |
| (Business Entity Name) | | | | | |
| (Document Number) | | | | | |
| Certified Copies Certificates of Status | | | | | |

Special Instructions to Filing Officer:

A. LUNT

SEP 27 2011

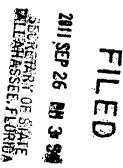
EXAMINER

Office Use Only



600212259296

09/26/11--01015--020 **25.00



COVER LETTER

| TO: Registration Division of | on Section Corporations | |
|------------------------------|---|--|
| SUBJECT: | HumonGous | |
| | Name of Limited Liability Company | |
| The enclosed Articles | es of Amendment and fee(s) are submitted for filing. | |
| Please return all corre | respondence concerning this matter to the following: | |
| | Reginald Bristol Name of Person | <u>. </u> |
| | Name of Person | |
| | HumonGows Firm/Company 2315 Central Ave | |
| | Firm/Company | * * 2 |
| | 2315 Central Ave | |
| | Address | |
| | Sh letersburg, Als 33713 | SSEE SSEE |
| | She leters burg , Ho 331/3 City/State and Zip Code Celfics Tall Rual (3) Yalobo , Com E-mail address: (to be used for future annual report notification) | FILED SP 26 M 3 9 MASSEE FLOOR |
| For further information | on concerning this matter, please call: | ≫ `` ® |
| Regimala | Brist at (727) 550-65 | 21 |
| ' Nan | me of Person Area Code & Daytime Teleph | one Number |
| Enclosed is a check for | or the following amount: | |
| \$25.00 Filing Fee | \$30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status Certificate of Status 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**

| HumonGo | rus | | | | |
|--|------------------------------------|---|------------------|---|-------------|
| (Name of the Limited L | iability Compa lorida Limited L | ny as it now appears or liability Company) | our records.) | | |
| The Articles of Organization for this Limited Lial | bility Company | were filed on \sqrt{AN} | lary 💋, Z | /// and assig | ned |
| Florida document number 4/10000// 70 | | | / / | , | |
| This amendment is submitted to amend the follow | ving: | | | ≇ 9 ≥ | |
| A. If amending name, enter the new name of t | he limited liab | ility company here: | | 22 22 | projection. |
| Humor | 160 ws | | | - See | 1:1 |
| The new name must be distinguishable and end with "L.L.C." | the words "Limi | | | ကျက် 📥 | · |
| Enter new principal offices address, if applicat | ole: | 2315 Con | from A | See W | 0 |
| (Principal office address MUST BE A STREET | ADDRESS) | 2315 Con | bus, El | 5月3.第7/ | 3 |
| | | | | | |
| Enter new mailing address, if applicable: | | 2315 Cen+ | tral An | <u>-</u> -> | |
| (Mailing address MAY BE A POST OFFICE B | <u>0X)</u> | 2315 Cent St. PEtersbo | ng Fla | 337/3 | |
| B. If amending the registered agent and/or registered agent and/or the new registered office | ce address here | <u>e</u> : | | | |
| Name of New Registered Agent: | Regina | Central Av Enter F Ersburg City | // | | |
| New Registered Office Address: | 2315 | Central Av | eAve | • | |
| | | Enter F | lorida street ad | dress | |
| | St. Kele | irsburg | , Florida | <i>3</i> 57/3 | |
| | | City | <u> </u> | Zip Code | |
| New Degistered Agent's Signature if changing Dec | | | | | |

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

Page 1 of 2

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 |
|-------------------|---|--|----------------|
| MGR | Reginald Bristol | 4420 174 AVE NOR North 54: Refersburg, 714. 33713 | Add Remove |
| MGL | To wande Flowler | 4420 17th Avenue north St. Petersburg, Ala 33713 | _ |
| | | | Add Remove |
| | | | Add Remove |
| | | | Add Remove |
| | | SSEWAY. | □ Remov |
| D. If amendin | g any other information, enter change(s | here: (Attach additional sheets, if necessary) | |
| | | | - |
| | | | - |
| Dated <u>58 f</u> | tember 22,2011 | | |
| | Reginald Bristol | authorized representative of a member printed name of signee | |

Page 2 of 2

Filing Fee: \$25.00