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**EXAMINER** 

SEGRETARY OF STATE DIVISION OF CORPORATIONS

## **COVER LETTER**

TO:	Registration S Division of Co			
SUBJE	CT:	HRD MA	ARKETING LLC	9.0
50101			ited Liability Company	THE STORY
The en	closed Articles of	Amendment and fee(s) are sul	bmitted for filing.	6
Please	return all corresp	ondence concerning this matter	r to the following:	3
			James L Harris	
			Name of Ferson	
		Н	RD MARKETING LLC	
			Firm/Company	
4340 W North B St APT 209				
			Address	
			Tampa, FL 33609	
			City/State and Zip Code	
		jlha	rris@hrdmarketing.com	
For fur	ther information	E-mail address: ( concerning this matter, please of	to be used for future annual report notificall:	cation)
		,		
		mes L Harris	at ( 813 )  Area Code & Daytime	260-7312
	Name	or Person	Area Code & Daytime	relephone Number
Enclose	ed is a check for	the following amount:		
\$25	5.00 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)
	Regist Divisi P.O. E	LING ADDRESS: ration Section on of Corporations Box 6327 assee, FL 32314	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 32	n ations nter Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## HRD MARKETING LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited L	iability Company were filed on	March 31, 2011	and assigned	
Florida document number L1100003	8934			
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name o	f the limited liability company h	ere:		
The new name must be distinguishable and end win "L.L.C."	th the words "Limited Liability Com	pany," the designation "LL	.C" or the abbreviation	
Enter new principal offices address, if applic	able:			
(Principal office address MUST BE A STREE	TT ADDRESS)	· · · · · · · · · · · · · · · · · · ·		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	DAV			
B. If amending the registered agent and/registered agent and/or the new registered of		our records, enter th	e name of the new	
Name of New Registered Agent:				
New Registered Office Address:				
	E	Enter Florida street address		
		, Florida		
	Citv		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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRM	Richard A Dunn	2909 W Leroy St Tampa, FL 33609	Add ✓ Remove 
<del></del>			Add Remove
			Add Remove
			Add Remove
<del></del>			Add Remove
			Add Remove
D. If amend	ling any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	
			_ _
Dated	, , , , , , , , , , , , , , , , , , ,		
	Signature of a m	nember or authorized representative of a member	
	<del> </del>	James L Harris Typed or printed name of signee	

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Filing Fee: \$25.00