#11000/24817

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KBALY EXAMINER MAY 10 2012

COVER LETTER

TO: Registration Division of C	n Section Corporations				
SUBJECT:	Hupp Retai	l Hillsborough, LLC			
		ited Liability Company			
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.			
Please return all corre	espondence concerning this matter	r to the following:			
		Andrew J. Hupp			
		Name of Person			
	Hupp	Hupp Retail Hillsborough, LLC			
		Firm/Company			
907 S. Ft. Harrison Avenue, Suite 102					
		Address			
•	(Clearwater, FL 33756			
		City/State and Zip Code			
	ro	salie@hupprealty.com to be used for future annual report notifica			
			tion)		
For further information	on concerning this matter, please of	call:			
i	Rosalie Gallina	at (_727_)2	10-1900		
Nan	ne of Person	Area Code & Daytime T	elephone Number		
Enclosed is a check for	or the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 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

HUPP RETAIL HILLSBOROUGH, LLC

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'E MAY -7 P.	
SECHE ARY OF S TALLARASSEE, FL	TATE

(Name of the Limited Liability Company (A Florida Limited Lia	y as it now app ability Compan	ears on our records.) y)	
The Articles of Organization for this Limited Liability Company v Florida document numberL11000124817	vere filed on _	November 1, 2011	_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company l	<u>iere</u> :	
The new name must be distinguishable and end with the words "Limite "L.L.C."	d Liability Cor	npany," the designation "LLC	C" or the abbreviation
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 registered agent and/or the new registered office address here:		our records, enter the	name of the new
Name of New Registered Agent:			
New Registered Office Address:	-		
		Enter Florida street addres	SS

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

If Changing Registered Agent, Signature of New Registered Agent

Florida

Zip Code

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
<u>MGRM</u>	Justin L. Basil	500 S. Howard Avenue Suite C Tampa, Florida 33606	Add Remove
			Add Remove
			Add Remove
			Add Remove
•			Add Remove
			Add Remove
D. If amend	ling any other information, ent	ter change(s) here: (Attach additional sheets, if necessary.)	
			<u> </u>
	April 26	20121	_
Dated	April 26 Signature of	a member of a thorized representative of a member	
		Andrew J. Hupp	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00