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COVER LETTER

TO: Registration Sec Division of Corp				
SUBJECT:	Hanks II	611 LLC		
	Name of Lim	ited Liability Company		
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
	chris	tian Cuesta	<u>S</u>	
	Har	KS 611 LLC		
	108 CO1	mmerce Stree	+ stelo1	
	Lake	May, £ 32	746	
	Admin (E-mail address: (May, F2 32. City/State and Zip Code ChanKS [4]. Code to be used for future annual report notified	20M fication)	
For further information co	ncerning this matter, please ca			
Christia Name of	n Cuestas	at (407) 399	17788 = = =	7-1
Enclosed is a check for the	e fullowing amount	at (407) 390 Area Code Daytime	•	
•	-		<u> </u>	
☑ \$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, \$\overline{\capacita}\$ Certificate of Status & Certified Gopy — (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

(Same of the Limited Liability Company as it now appears on our records) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 2 10 20 2 and assigned Florida document number 1 2 0000 20 197 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 contain 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 Enter Florida street address Enter Florida street address Enter Florida street address Florida Florida Limited Liability Company and assigned This amending the abstract address address on our records. Enter Florida street address Enter Florida street address Florida Florida Limited Liability Company This amending the registered agent and/or registered office address on our records. Enter Florida street address Florida Limited Liability Company This amending the abstract address address on our records. Enter Florida street address Florida Limited Liability Company This amending the registered agent and/or registered office address on our records. Florida Limited Liability Company This amending to paid a designation "LLC" or the abbreviation "LLC" or the abbreviatio	Hanks 1611 1	-lc	
Florida document number L\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(<u>Name of the Limited Liability Compa</u> (A Florida Limited l	ny as it now appears on our records.) Liability Company)	
A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain 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 Enter Florida Florida Florida Florida	11-000000000	were filed on 2 10 2013	2 and assigned
The new name must be distinguishable and contain 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 Agent: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Enter Florida Florida	amendment is submitted to amend the following: f amending name, enter the new name of the limited liability company here: new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." er new principal offices address, if applicable: ncipal office address MUST BE A STREET ADDRESS) er new mailing address, if applicable: No. 10 Value Value		
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Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida Florida		1891 W Fairbank Winterpark Fi	s Ave 32789
New Registered Office Address: Enter Florida street address Florida Florida			the name of the new
New Registered Office Address: Enter Florida street address Florida Florida	Name of New Registered Agent:	(x): (x): (x): (x): (x): (x): (x): (x):	-
	New Registered Office Address:	Enter Florida street address	0 0 -
			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 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: MGR = Manager AMBR = Authorized Member Title Reginald Dvince 108 commerce street #101 Lake May, FL 32746 PREMOVE ☐ Change Authorized Lushanda Dvivce 1750 Markham Bend Pl ☐ Change □ Add ☐ Remove ☐ Change Remove Remove ☐ Change □ Add ☐ Remove

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Filing Fee: \$25.00