2/2000036934

(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 25 2012						
EXAMINED						
Office Use Only						



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COVER LETTER

Programme Registration & Division of Co		•				
SUBJECT:	Dangler H	łockey 1363 LLC				
		Name of Limited Liability Company				
	of Amendment and fee(s) are sul	-				
Please return all corresp	condence concerning this matter	to the following:				
		Elizabeth Arias				
Name of Person						
		_				
	10	28 SW 66 Ave., Apt. 3		~ 12		
		Address		2112 SEP 21		
		Miami, FL 33144				
		City/State and Zip Code				
	E-mail address: (arias323@gmail.com to be used for future annual report	notification)	TO B	TIL	
For further information	concerning this matter, please of	•	nomicalion,	1000 P	O	
Ε.	lizabeth Arias	at (305)	508-8717	.		
Name	of Person		ytime Telephone Numb	per		
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 encl-	Certificosed) Certific	Filing Fee, cate of Status & ed Copy onal copy is enc	losed)	
MAILING ADDRESS:		STREET/CO	URIER ADDRESS:			

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	angler Hock	ey 1363 LLC			
(Name of the Limite	d Liability Compa A Florida Limited I	iny as it now appear Liability Company)	<u>'s on our records.</u>)		
The Articles of Organization for this Limited Liability Company were filed on			3/15/2012	and assigned	
Florida document number L1200003	6934				
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name	of the limited lial	bility company her	<u>e</u> :		
	N/A				
The new name must be distinguishable and end w "L.L.C."	ith the words "Lim	nited Liability Compa	iny," the designation "I	LC" or the abbreviatio	
Enter new principal offices address, if appli	cable:	N/A			
(Principal office address MUST BE A STREET ADDRESS)			<u> </u>		
			7 · =	Ç <u>e</u>	
			75 g 65 g	N	
Enter new mailing address, if applicable:		N/A			
(Mailing address MAY BE A POST OFFICE BOX)			מַתְּי	3	
			32		
			<u></u>	6	
B. If amending the registered agent and registered agent and/or the new registered of			our records, <u>enter t</u>	the name of the nev	
Name of New Registered Agent:	N/A				
New Registered Office Address:	N/A				
		En	ter Florida street ada	lress	
		, Florida			
		City		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 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> Name <u>Address</u> Type of Action MGRM Elizabeth Arias 1028 SW 66 Ave., Apt. 3 **⊘** Add Miami_FL 33144 Remove Maxwell A. Barrington MGR 1028 SW 66 Ave., Apt. 3 √ Add Miami, FL 33144 ☐ Remove MGRM Maxwell A. Barrington 1028 SW 66 Ave., Apt. 3 _ Add Miami, FL 33144 Elizabeth Arias MGR 1028 SW 66 Ave., Apt. 3 Add Miami, FL 33144 Remove []Add ₽ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Signature of a member or authorized representative of a member

Elizabeth Arias
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00