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Division of Corporations fax Number : (850)617-6383

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A. Account Number : 076077001702

: (407)841-1200

Fax Number : (407)423-1831

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: tracy.duda-chapman@duda.com

LLC AMND/RESTATE/CORRÉCT OR M/MG RESIGN DGS HACKLEBURG, LLC

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D. BRUCE

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DEC 18 2012 EXAMINER

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DGS HACKLEE	BURG, LLC		<u></u>	
(<u>Name of the Limited Liability Company</u> (A Florida Limited Liab	as it now appears ollity Company)	on our records.)		
The Articles of Organization for this Limited Liability Company we Florida document number <u>L12000060085</u> .	ere filed on	05/03/2012	and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabilit	y company here	:		
The new name must be distinguishable and end with the words "Limited "L.L.C."	Liability Compar	ny," the designation "L	LC" or the abbreviation	o.
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				
			Z _o	
Enter new mailing address, if applicable:			DEC CRE i/ LAHA	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)			7 RY SSE	
·	· · · · · · · · · · · · · · · · · · ·	- Aller Sales	C OF	0,0
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	e address on o	ur records, <u>enter t</u>	he name of the sev	<u>⊼</u>
Name of New Registered Agent:				
New Registered Office Address:	fi	er Florida street addi		
	Enu	er rioriaa sireet aaai	ress	
		, Florida	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

Page 1 of 2

792595.pdf

DEAN MEAD ORLANDO (((H120002946783)))

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
MGRM	Duda PMC Properties, LLC	1200 Duda Trail Oviedo, FL 32765	Add Remave
MGR	Tracy Duda Chapman	1200 Duda Trail Ovledo, FL 32765	Add Remove
MGR	Palmer B. Weeks, Jr.	1200 Duda Trail Oviedo, FL 32765	Add Remove
<u>MGR</u>	Mark E. Engwall	1200 Duda Trail Oviado, FL 32765	Add Remove
	<u> </u>		Add Remove
			12 PEC
		ge(s) here: (Attach additional sheets, if necessary.)	EC 17 AM 9: 26 RETARY OF STATE ATHASSEE, FLORID.
		ation is hereby amended in its entirety to rea	
<u>as</u>	follows: "Article IV - M	Annagement	- 38 C
	The Company is to be a member		
Dated	December /7 2	2012	
		per or truthorized representative of a member Senior Vice Presentation of significant control of significant cont	sident

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APPROVE