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SECRETARY OF STATE TALLAHASSEE, FLORIDA

D. BRUCE

DEC 13 2012

EXAMINER

COVER LETTER

TO: **Registration Section Division of Corporations**

HAGSHAMA PHILADELPHIA 2 LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

TALY DERY Name of Person TD CPA Firm/Company 3801 HOLLYWOOD BLVD STE-100A

Address

HOLLYWOOD, FL, 33021

City/State and Zip Code

TDERY@TDCPAFIRM.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TALY DERY

Name of Person

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 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

HAGSHAMA PHILADELPHIA 2 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 Liability Company were filed on NOV 06, 2012 Florida document number <u>L1200</u>0140530 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: HAGSHAMA PHILADELPHIA 3 LLC The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 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

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

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>:

<u>Title</u>	Name	Address	Type of Action
····			Add
			Remove
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			Add
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• • •	nter change(s) here: (Attach additional sheets, if necessary.)
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DECEMBER 10TH	2012
DECEMBER 10TH	2012
	2012 of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00

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