

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

(((H13000073043 3)))

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H130000730433ABCV

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To:

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

From:

Account Name : GREENBERG, TRAUIG, HOFFMAN, ET AL.
Account Number : 076077001461
Phone : (305) 789-5357
Fax Number : (305) 961-5357

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

Email Address: schindler0@gtlaw.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
HDG HOLDINGS, LLC

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

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APR 2 2013(((H13000073043 3)))

G. McLEOD

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

(((H13000073043 3)))

HDG Holdings, 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 February 4, 2013 and assigned
Florida document number L13000017801.

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 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
registered agent, and/or the new registered office address here:**

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, 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 Changing Registered Agent, Signature of New Registered Agent

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STATE OF FLORIDA
TALLAHASSEE

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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

MCRM = Managing Member

Title	Name	Address	Type of Action
MGR	Daniel Cababie	777 Brickell Avenue	<input checked="" type="checkbox"/> Add
		Suite 950	<input type="checkbox"/> Remove
		Miami, FL 33131	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated April 1, 2013



Signature of a member or authorized representative of a member

Daniel Cababie

Typed or printed name of signee

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