L13000047908

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SECRETARY CONTAINE

COVER LETTER

TO: Registration Section 5 Division of Corporations

HEDGE-ESTATE 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:

Donald N. Jacobson, Esq.

Name of Person

Donald N. Jacobson, P.A.

Firm/Company

120 S. Olive Ave., Suite 208

Address

West Palm Beach, FL 33401

City/State and Zip Code

donald@dnjlaw.com

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

For further information concerning this matter, please call:

Mark Oliva

",561<u>,</u>83**5-8436**

Name of Person

Area Code & Daytime Telephone Number

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**

HEDGE-ESTATE LLC			
(<u>Name of the Limited</u> (/	Liability Compa Florida Limited I	ny as it now appear Liability Company)	rs on our records.)
The Articles of Organization for this Limited L Florida document number L13000047908			
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	f the limited liab	oility company her	re:
The new name must be distinguishable and end wi "L.L.C."	th the words "Lim	ited Liability Compa	any," the designation "LLC" or the abbreviation
Enter new principal offices address, if applic	able:	120 S. Olive	Ave.
(Principal office address MUST BE A STREET ADD		Suite 200	
		West Palm B	each, FL 33401
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		120 S. Olive Suite 200	Ave.
		West Palm E	Beach, FL 33401
B. If amending the registered agent and/ registered agent and/or the new registered o			our records, <u>enter the name of the new</u>
Name of New Registered Agent:	Donald N.	Jacobson, P.A.	
New Registered Office Address:	120 S. Olive Ave., Suite 208 Enter Florida street address		
	LA1 (500 L		
	West Palm		Florida 33401
New Registered Agent's Signature if changing	n	City	Zip Code
New Revisieren Avent's Signature, it changing	KEVISIEFEN AVENT!		

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

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>:

• MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Allison Ram-Schneider	120 S. Olive Ave.	Add
		Suite 200	Remove
	>,	West Palm Beach, FL 3340	1
			Add
			Remove
			Kemove
			- □
			
		Sep (5) 207	Remove
	٠,	Was Sept.	Add
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		2.7. (a. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	Add
		<u></u>	CO Promote
			M 8: 3
			<u>:=</u> ; ω

f amending any other information, ent	ter change(s) here: (Attach additional sheets, if necessary.)
April 23	2013
Signature of	a member or authorized presentative of a member
Andrew Schneider	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00