Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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	Phone Fax Number	; (407)418-2435 ; (407)420-5909		
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HKMY, LLC	
(<u>Name of the Limited Limited</u> (A Florida	y Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co Florida document number L13000085189	ompany were filed on 06/12/2013 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ted liability company here:
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the designation "LLC" or the abbreviation "LTC."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDR	ESSS)
	9. O
Enter new mailing address, if applicable:	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered agent and/or the new registered office additional and of New Registered Agent:	tered office address on our records, enter the name of the new ress here:
•	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registere	d Agent:
provisians of all statutes relative to the proper and e	and agree to act in this capacity. I further agree to comply with the omplete performance of my duties, and I am familiar with and gent as provided for in Chapter 605, F.S. Or, if this document is ed office address, I hereby confirm that the limited liability
	If Changing Registered Agent, Signature of New Registered Agent

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
AMBR	Mark Young	1701 Porter SW	
		Suite 6	C Remove
		Wyoming, MI 49519	
AMBR	Daniel Hibma	1701 Porter SW	
		Suite 6	
		Wyoming, MI 49519	
AMBR	Roger Lucas	170) Porter SW	
-		Suite 6	
		Wyoming, MI 49519	
AMBR	FLPRD, LLC	1701 Porter SW	■ Add
		Suite 6	□ Remove
		Wyoming, MI 49519	□ Change
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vote:	If the date inserted in this block does not meet the applica	tble statutery filing requirem	ents, this date will not be listed as
locum	nent's effective date on the Department of State's records.		
e rec	cord specifies a delayed effective date, but not	t an effective time, at 1	L2:01 a.m. on the earlier o
The	e 90th day after the record is filed.		
	November 15 2017		
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Filing Fee: \$25.00