# L13000101065

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| PICK-UP                   | ☐ WAIT           | MAIL      |
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| (Bus                      | iness Entity Nan | ne)       |
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| Certified Copies          | Certificates     | of Status |
|                           |                  |           |
| Special Instructions to F | iling Officer:   |           |
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TAIL AHASSEE FLORIDA

DEC 2 2 2015 J. HARRIS

#### **COVER LETTER**

| TO: Registration Section Division of Corporations   |
|---|
| SUBJECT: H20 Holdings ((C<br>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:   |
| Name of Person  |
| Hao Holdings LLC Firm/Company   |
| P.O. Box 8671  Address  |
| MADERA BEACH FL 33738  City/State and Zip Code  |
| E-mail address: (to be used for future annual report notification)  |
| For further information concerning this matter, please call:  |
| Name of Person at (919) 796-6178  Area Code Daytime Telephone Number  |
| Enclosed is a check for the following amount:   |
| \$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certificate of Status}\$\$ Certificate of Status \$\Bigcup \text{\$60.00 Filing Fee, Certified Copy (additional copy is enclosed)}\$\$\$ 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

### TO ARTICLES OF ORGANIZATION **OF**

| HOO HOLDING LC   |                            | our records                             |                 |
|--|----------------------------|---|-----------------|
| (Name of the Limited Chability Compa<br>(A Florida Limited I               | Liability Company)         | our records.)                           |                 |
| The Articles of Organization for this Limited Liability Company            | were filed on              | 4 16,2013 a                             | nd assigned     |
| Florida document number <u>L13000101065</u> .                              |                            | 1                                       |                 |
| This amendment is submitted to amend the following:                        |                            |   |                 |
| A. If amending name, enter the new name of the limited liab                | ility company here:        |   |                 |
|  |                            |   |                 |
| The new name must be distinguishable and contain the words "Limited Liabil | lity Company," the designa | ation "LLC" or the abbreviat            |                 |
| Enter new principal offices address, if applicable:                        |                            | 7.F+ :                                  |                 |
| Principal office address MUST BE A STREET ADDRESS)                         | <del></del>                | <u></u>                                 |                 |
|  |                            |   | ( ) man         |
|  | _                          | ור:<br>נרו                              |                 |
| Enter new mailing address, if applicable:                                  |                            |   |                 |
| Mailing address MAY BE A POST OFFICE BOX)                                  |                            | = |                 |
| Manual address will be 111 out of the bony                                 |                            |   | 177 6           |
|  |                            |   |                 |
| 3. If amending the registered agent and/or registered of                   | fice address on our        | records, enter the n                    | ame of the new  |
| registered agent and/or the new registered office address here             |                            | <u></u>                                 | <u> </u>        |
|  |                            |   |                 |
| Name of New Registered Agent:  |                            |   |                 |
| Navy Registered Office Address   |                            |   |                 |
| New Registered Office Address:   | Enter Florida str          | reet address                            |                 |
|  |                            | T71 2 J -                               |                 |
|  | City                       | , Florida<br>Zip                        | Code            |
| New Registered Agent's Signature, if changing Registered Agent:            | •                          |   |                 |
| hereby accept the appointment as registered agent and agre                 |                            | city I further garee 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 605, 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

## or removed from our records: MGR = Manager AMBR = Authorized Member-<u>Title</u> <u>Name</u> Address **Type of Action** william m. Hairell P.O. Box 867

|     |                             | THURTH BEACH, FL                      | Remove               |
|-----|-----------------------------|---------------------------------------|----------------------|
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| WES | william m. Harrell, AS True | Hre Po Box 8671  Madeira Beach, Fl 33 | <b>⊅</b> ≰Add        |
|     | December 11,2015            | Madeira Beach, Fl 33                  | 73 <u>%</u> □ Remove |
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| (If an er<br><b>Note:</b> | ive date, if other than the date of filing:  [cetive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after fill the date inserted in this block does not meet the applicable statutory filing requirements, this dent's effective date on the Department of State's records. | ling.) Pursuant to 605.0207 (3)(b |
| If the re<br>(b) The      | cord specifies a delayed effective date, but not an effective time, at 12:01 a.r<br>90th day after the record is filed.   | m. on the earlier of:             |
| Dated                     | December 11, 2015.  | IAL Z                             |
|                           |   | LARL DEC                          |
|                           | Signature of a member or authorized representative of a member  | V Proper                          |
|                           | Signature of a member or authorized representative of a member  William M. Harrell MANA Geo.  |                                   |

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Filing Fee: \$25.00