113000124179

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	<u></u>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



700251390187

09/10/13--01011--010 **25.00

NAME OF THE STATE OF THE STATE

TO AHID: L3

SEP 11 2013

SECRETARY OF STATE TALLAHASSEE, FLORIDA

CORPORATE ACCESS,

"When you need ACCESS to the world"

INC.

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066)

~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

	•	WALK IN	
	PICK UP:	919	
	CERTIFIED COPY	, 	
Þ	РНОТОСОРУ _		
	CUS		
Þ	FILING	40 Amend	
1.	HOLSODOWEL	Floreda, LLC	
	(CORPORATE NAME AND DOCUMENT #)		
2.	(CORPORATE NAME AND DOCUMENT #)		
3.			
ο.	(CORPORATE NAME AND DOCUMENT #)		7 28 28
4.			METANY TO THE TANK OF THE TANK
	(CORPORATE NAME AND DOCUMENT #)		그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그
<i>5</i> .	(CORPORATE NAME AND DOCUMENT #)		19. 19. 19. 19. 19. 19. 19. 19. 19. 19.
6.			\$ 7
0.	(CORPORATE NAME AND DOCUMENT #)		
SPECIA	AL INSTRUCTIONS:		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HORSEPOWER FLORIDA, 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	y were filed on September 3, 2013	and assigned
Florida document number L13000124179		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:	P.O. Box 1522	50 2
(Mailing address MAY BE A POST OFFICE BOX)	Rancho Santa Fe CA 92067	SECRETARS
·		TARY 10
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		e name of the new
Name of Navy Desistened Agents		ORIDE
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addre	SS
	, 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

Page 1 of 3

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:

2	<u>Name</u>	Address	Type of Action
			Add
		-	[]
			Remove
		·.	
		·	Add
	 	.,	[] Add
			Remove
			Add
			
			Remove SI
			= FI P
			Add Fig. Removed 99
		_ · · · <u> </u>	Adding
			Remove 4
			RIDA.
		:	
		· · · · · · · · · · · · · · · · · · ·	Add
			Remove
		·	Add
			Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)			
•			
-			
-			
-			
Dated			
	Jehrah Halliday		
	Signature of a member or authorized representative of a member		
	Deborah W. Halliday		
	Typed or printed name of signee		
	Page 3 of 3		

Filing Fee: \$25.00

2013 SEP 10 AM 9. 44