113000156709

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	#)
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(Document Number)		
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B. BOSTICK
JUN 1 ... 2014

FXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: H+H Real Estate Investing, 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:
Carl Hawk
Name of Person
HIH Real Estate-Investing, LLC
Firm/Company
9635 Guznan Ave
Address
Hastings A 32145
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Hunter Hayden ar (904) 742-2658
Name of Person Area Code Daytime Telephone Number
·.:
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\bigcup \\$30.00 Filing Fee & \bigcup \\$55.00 Filing Fee & \bigcup \\$60.00 Filing Fee, Certificate of Status & Certificate of Status & 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

H++ Real Istate	Investing, LLC	
(Name of the Limited Liability Compan (A Florida Limited L	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company of Florida document number <u>L13000156709</u> .	were filed on 11/07/2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and end with the words "Limited Liabi	lity Company," the designation "LLC" or the abl	reviation "L.L.C."
Enter new principal offices address, if applicable:	9310 Old Kings	Local
(Principal office address MUST BE A STREET ADDRESS)	Swite 1702 Jacksonville, Flo	srider 32257
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9310 Old Kings Suite 1702 Jacksonville, F	Road Torida 3225
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		he name of the new
Name of New Registered Agent:) · · · ·
New Registered Office Address:	Enter Florida street address	
	, Florida	Zip Code
	y	

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 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

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action	
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		□ Remove		

).]	lf amend	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
		,
		<u></u>
]	Effective	e date, if other than the date of filing:
`		is document is filed by the Florida Department of State)
	Dated	June 8th, 2014. p //
		Signature of a member or authorized representative of a member
		Curl Hawk
		Typed or printed name of gionee

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Filing Fee: \$25.00