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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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COVER LETTER

| TO: Registration Sec Division of Corp | | | |
|--|--|---|--|
| SURVECT: HPD | Development | Group LLC | |
| SUBJECT: | | ited Liability Company | |
| | | | |
| The enclosed Articles of A | Amendment and fee(s) are sub- | mitted for filing. | |
| Please return all correspon | idence concerning this matter | to the following: | |
| | Gary Cook | | |
| | | Name of Person | |
| | | | |
| | | Firm/Company | |
| | 17630 SW 7 | '6th Ave | |
| | | Address | |
| | Palmetto Ba | y, FL 33157 | |
| | | City/State and Zip Code | |
| | E-mail address: (| to be used for future annual report notifi | cation) |
| For further information co | oncerning this matter, please c | alf; | |
| Gary Cook | | _{at (} 305 ₎ 909-93 | 382 |
| Name of | Person | Area Code Daytime | Telephone Number |
| | | | |
| Enclosed is a check for th | _ | | |
| ■ \$25.00 Filing Fee | 口 S30.00 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 Taliahassee, 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

| HPD Development Group LLC | | |
|---|---|--|
| (Name of the Limited Liability Comp. | any as it now appears on our records.) Liability Company) | |
| The Articles of Organization for this Limited Liability Company Florida document number L1400046461 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab | y were filed on March 20, 20 | 2014 APR -2 PH 1: 3 SECRETARY OF STATE TALL AHASSEE, FLORI |
| The new name must be distinguishable and end with the words "Limited Lia | bility Company," the designation "LLC" (| or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | 17630 SW 76th Ave. | |
| (Principal office address MUST BE A STREET ADDRESS) | Palmetto Bay, FL 331 | 57 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 17630 SW 76th Ave. Palmetto Bay, FL 331 | |
| B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. | | inter the name of the new |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida street address | |
| | , Floric | |
| | 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 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 = M $AMBR = A$ | anager uthorized Member | | |
|--------------------|----------------------------|---------|---|
| <u>Title</u> | Name | Address | Type of Action |
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|). If amending any other information, o | enter change(s) here: (Attach additi | onal sheets, if necessary.) |
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| | , | |
| Effective date, if other than the date (The effective date must be specific, cannot be p | of filing: | (optional) |
| the date this document is filed by the Florida D | | be more than 90 days after |
| Dated March 28 | 2014 | |
| Dated | | |
| (1/1) | S MEL | |
| /Signat | ture of a member of authorized representativ | e of a member |
| Gary Cook | / | |
| | Typed or printed name of signee | |

Page 3 of 3

Filing Fee: \$25.00

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SECRETARY OF 35AFE
TALL ARMSSEE, FLORID