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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	• #)
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SECREJARY OF STATE
TAPL AHASSEE FROM

COVER LETTER

TO: Registration So Division of Co			
Half I	Measures Gro	up LLC	
SUBJECT:		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Kim McMah	on	
		Name of Person	
		Firm/Company	
	850 NE 3rd	Street, #213	
		Address	
	Dania Beacl	n, FL 33004	
		City/State and Zip Code	".
	kmcmahon@ayss	ales.com to be used for future annual report notifi	antian
For firsther information of		•	canony
	concerning this matter, please c		-00
Kim McMal	non	_{at (} 954 _{.)} 921-13	500
Name o	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	□ \$30.00 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)
	ING ADDRESS:	STREET/COURII Registration Section	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Half Measure		_			
(Name of the Lim	ited Liability Compa (A Florida Limited I	ny as it now appears Ciability Company)	on our records.)		_	
The Articles of Organization for this Limited I Florida document number 60026181		were filed on	July 14, 20)14 and	l assigr	ned
This amendment is submitted to amend the fol	lowing:					
A. If amending name, enter the new name	of the limited liab	ility company her	<u>e</u> :			
The new name must be distinguishable and end with the	e words "Limited Liab	oility Company," the de	esignation "LLC" or t	he abbreviation	on "L.L.	.C."
Enter new principal offices address, if applicable:		850 NE 3rd Street, #213				
(Principal office address MUST BE A STREET ADDRESS)		Dania Bead	h, FL 33004	1		
Enter new mailing address, if applicable:		850 NE 3rd	Street, #213	3		
(Mailing address MAY BE A POST OFFICE	E BOX)	Dania Bead	ch, FL 33004	1		
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent: New Registered Office Address:	Charles B	e: iggie rd Street, #21 Enter Florid	3 da street address	SECRETARY 048	me of 14 SEP - 8 PM I	the new
	<u> </u>	City	, Florida	©Zip C	ode	
New Registered Agent's Signature, if changing	Registered Agent:			<u>ĝ</u> á	9	
I hereby accept the appointment as register provisions of all statutes relative to the pro-						

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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

MGR = Manager

AMBR = Authorized Member **Type of Action** <u>Title</u> Name **Address** 850 NE 3rd Street #213 Charles Biggie MGR Dania Beach, FL 33004 Remove 11318 Water Oak Place Josh Ruskin MGR Davie, FL 33330 _□ Add □ Add Remove Remove ☐ Remove

_			
			
	date, if other than the date of filing ve date must be specific, cannot be prior to de	ng: 09/08/2014 ate of receipt or filed date and cannot be more	(optional)
	is document is filed by the Florida Departme		

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Filing Fee: \$25.00

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SECREJARY OF STATE
TALLAHASSEE, FLORID