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### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN HORSEHEAD NEBULA, LLC

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Abbreviations:

**HS: Host send** HR: Host receive WS: Walting send PL: Polled local PR: Polled remote

MS: Mallbox save

MP: Mailbox print RP: Report FF: Fax Forward

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G3: Group 3 **EC: Error Correct** 

September 12, 2014

# \*FLORIDA DEPARTMENT OF STATE Division of Corporations

HORSEHEAD NEBULA, LLC 538 FIRST AVENUE NORTH ST PETERSBURG, FL 33701

SUBJECT: HORSEHRAD NEBULA, LLC

REF: L14000134682

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Jenna D Harris Regulatory Specialist II FAX Aud. #: E14000214052 Letter Number: 614A00019594

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DIVISION OF CORPUSATIONS
INFORMATION SERVICES

# ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

## OF HORSEHEAD NEBULA, LLC

Pursuant to the provisions of Chapter 605 of the Plotida Statutes, the undersigned hereby declares the following umendment (the "Amendment") was adopted to the Anieles of Organization of HORSEFIEAD NEBULA, LLC, a Florids limited liability company ("the Company") originally filed with the Secretary of State, State of Florida on August 27, 2014 and assigned Florida document number L 14000134682:

Amendment. Article 7 of the Company's Articles of Organization is hereby antended so as to read, after Amendment, as follows:

#### "ARTICLE 7: MANAGEMENT: MEMBERS

Initially the Company is to be managed by one manager, who may or may not be a member. The number of managers may either be increased or decreased from time to time by agreement by the members but shall never be less than one. The name and eddress of the Manager is:

NAME

**ADDRESS** 

Dave Kollo

6792 16th Avenus North St. Petersburg, PL 33710"

Effective Date. Amendment effective The shalt become

IN WITNESS WHEREOF, the undersigned has executed and signed these Articles of Amendment on behalf of the Company 2 day of State 2014.

Dave Kolle, as its Manager and **Authorized Representative** 

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