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(Requestor's Name)

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14 OCT 20 PM 1:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 22 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hive Maintenance LLC EIN 47-1880918
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:

BERNARD K REICHEL, JR
Name of Person
Hive Maintenance LLC
Firm/Company
311 South Willow Ave
Address
Tampa, FL 33606
City/State and Zip Code
bud@hiveoutdoor.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bernard Reichel at 727 638 9062
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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)

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**

HIVE Maintenance, 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 were filed on _____ and assigned
Florida document number L 14000145960

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

311 South Willow Ave.
Tampa, FL 33606

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

311 South Willow Ave
Tampa, FL 33606

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

311 South Willow Ave

Enter Florida street address

Tampa

City

, Florida

33606

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 = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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TALLAHASSEE, FLORIDA
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

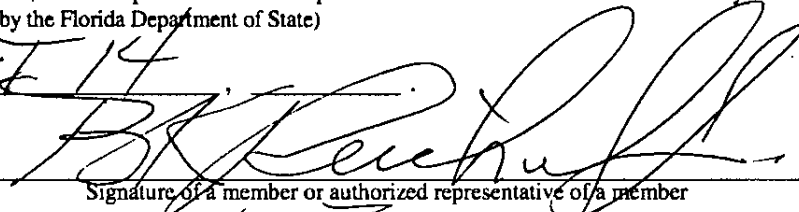
ARTICLE IV (ATTACHED)

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated

16 OCT 14



Signature of a member or authorized representative of a member

BERNARD K. REICHEL, JR

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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14 OCT 20 PM 1:24
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TALLAHASSEE, FLORIDA

Article IV

The name and address of person(s) authorized to manage LLC:

Title: ~~S~~ *MGR*
MATTHEW L BIENKOWSKI
5805 IMPERIAL KEY
TAMPA, FL. 33615 US

Title: ~~MGR~~ *AMBR*
JEFF HARRIS
5805 IMPERIAL KEY
TAMPA, FL. 33615

Title: ~~#~~ *AMBR*
ROBERT FOSTER
5805 IMPERIAL KEY
TAMPA, FL. 33615

Title: ~~#~~ *AMBR*
BERNARD REICHEL
5805 IMPERIAL KEY
TAMPA, FL. 33615

L14000145960
FILED 8:00 AM
September 18, 2014
Sec. Of State
kasaly

Signature of member or an authorized representative

Electronic Signature: KUNAL SEJPAL

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.