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COVER LETTER

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	mosa Holdings, LLC			
SUBJECT:	Name of Lim	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:		
	Kent Runnells			
	Kent Runnells, P.A.	Name of Person		
	531 Main St., Suite F	Firm/Company		
	Safety Harbor, FL 34695	Address		
	mary@legalkent.com	City/State and Zip Code		i Vice
For further information of	E-mail address: (concerning this matter, please co	to be used for future annual report notifi all:	cation)	1 SEP 23 PM 4: 1
Kent Runnells		727 726-2728		3 P
Name o	of Person		Telephone Number	ORATIONS
Enclosed is a check for t	he following amount:			7)
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing For Certificate of Society Certified Copy tadditional copy is	Status &

MAILING ADDRESS:

Registration Section Division of Corporations

TO:

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 ARTICLES OF ORGANIZATION **OF**

	ТО	<i>.</i> : ,
ARTI	CLES OF ORGANIZATION	
	OF	
		20 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8
Tierra Hermosa Holdings, LLC		اري در
(Name of the Limited	d Liability Company as it now appears on our records.) A Florida Limited Liability Company)	and assigned
The Articles of Organization for this Limited Lia	ibility Company were filed on 09/25/2014	and assigned
lorida document number L14000150527		
iorida document number	<u> </u>	
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of t	the limited liability company here:	
Fierra Hermosa, LLC	The second secon	
	rds "Limited Liability Company," the designation "LLC" or th	
the new frame must be distinguishable and contain the wo.	ras Estimed Liability Company, the designation (EEC of th	Cappicviation E.E.C.
Enter new principal offices address, if applical	ble:	
Principal office address MUST BE A STREET	ADDRESS)	
<u>Principal office address MUST BE A STREET</u>	ADDRESS)	
Principal office address MUST BE A STREET	ADDRESS)	
	ADDRESS)	
Enter new mailing address, if applicable:		
Enter new mailing address, if applicable:		
Enter new mailing address, if applicable:		
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE B	<u></u>	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE B B. If amending the registered agent and/o	r registered office address on our records, ent	
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE B</u> 3. If amending the registered agent and/o	r registered office address on our records, ent	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE B B. If amending the registered agent and/oregistered agent and/ore the new registered office.	r registered office address on our records, ent	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE B 3. If amending the registered agent and/o	r registered office address on our records, ent	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE B B. If amending the registered agent and/oregistered agent and/ore the new registered office.	r registered office address on our records, entice address here:	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE B 3. If amending the registered agent and/oregistered agent and/or the new registered office. Name of New Registered Agent:	r registered office address on our records, ent	
registered agent and/or the new registered offi Name of New Registered Agent:	r registered office address on our records, entice address here:	er the name of the no

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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager	
AMBR = Authorized Member	

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Remove
			Change
			Remove
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Iffective date, if other than the	date of filing:	(optional) of filing or more than 90 days after filing.) Pur	
Sote: If the date inserted in this blo	ek does not meet the applicable s	atutory filing requirements, this date will	
locument's effective date on the De	partment of State's records.		
e record specifies a delayed	effective date, but not an	effective time, at 12:01 a.m. on (the earlier of
The 90th day after the reco	ord is filed.	·	
September 18	2019		
Dated September 18	Authorized		
1 /			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00