Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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	Division of Corporations
	Fax Number : (850)617-6383
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	Phone : (727)442-1200
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	프 <u>즐걸 ;</u>

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Electronic Filing Menu

Corporate Filing Menu

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HAMMER HAAG LEASIN			
(Name of the Lim	ited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited I Florida document number L15000050762	rch 20, 2015 a	and assigned	
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liability company her	<u>e</u> :	
The new name must be distinguishable and end with the	words "Limited Liability Company," the de	signation "LLC" or the abbrevia	stion "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
Euter new mailing address, if applicable:		TALLAHA	TO HAR
(Mailing address MAY BE A POST OFFICE	BOX	SS AS	
13. If amending the registered agent and registered agent and/or the new registered of	or registered office address on fifice address here:	our records, enter the n	anic of the new
Name of New Registered Agent:	Brian W. Bennett		
New Registered Office Address:	214 E. Lucerne Circle		
	Enter Florid	a street address	
	Orlando	Florida 32801	·
	City	2ip	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, thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent Signature of New Registered Agent

Page 1 of 3

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 = N $AMBR = A$	Ianager Luthorized Member		
<u>Title</u>	Name	<u>Address</u>	Type of Action
			Remove
			E CO Addi
			El Remoye
			PH FLOW Add So Book So
			□ Remove
			Add
		·	□ Remove
			D Add
			D Remove

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D.	If amendi	amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
	J			
			<u> </u>	
	<u></u>			
E.	(The effective	date, if other than the date of filing: e date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 is document is filed by the Florida Department of State)	(optional) days after	
	Dated	April 21, 2015		
	•	Signature of a member or authorized representative of a member		
		ALAN S. GASSMAN, AUTHORIZED REPRESENTATIVE		
		Typed or printed name of signee		

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