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| Certified Copies | Certificates | of Status |
| Special Instructions to F | Filing Officer: | |
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2022 MAY -3 AM 7: 58
SECHELARY OF STATE

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COVER LETTER

| TO: Registration Se Division of Cor | | | |
|--|--|---|--|
| HERMES : | PROPERTY DEVELOPMENT | T, LLC | |
| SUBJECT: | Name of Lin | nited Liability Company | |
| The enclosed Articles of | Amendment and fee(s) are sub | omitted for filing. | |
| Please return all correspo | undence concerning this matter | to the following: | |
| | Marc Hermes | | |
| | | Name of Person | |
| | HERMES PROPERTY D | EVELOPMENT, LLC | |
| | ······································ | Firm/Company | · |
| | 757 S.E. 17TH STREET; | #1190 | |
| | | Address | · - · |
| | Fort Lauderdale, FL 3330 | I | |
| | mhermes@libertysf.com E-mail address; (| City/State and Zip Code to be used for future annual report noti | fication) |
| For further information of | concerning this matter, please c | all: | |
| Marc Hermes | | 954 296-2746 | |
| Name o | of Person | at () Area Code Daytim | e 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) |
| Mailing Addres Registration | | <u>Street Address:</u> Registration Sec | ction |
| Division of C | Corporations | Division of Cor | porations |
| P.O. Box 632 | 27 | The Centre of T | alfahassee |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2022 MAY -3 AM 7: 58 -

HERMES PROPERTY DEVELOPMENT, LLC

(Name of the Limited Liability Company as it now appears on our records.)

| (A Florida | Limited Liability Company) | SB RHD RHD |
|--|---|------------------------------|
| The Articles of Organization for this Limited Liability Co Florida document number L15000081639 | ompany were filed on 05/07/2015 | and assigned |
| This amendment is submitted to amend the following: | <u>-</u> · | |
| A. If amending name, enter the new name of the limit | ted liability company here: | |
| The new name most be distinguishable and contain the words "Limit | ted Liability Company," the designation "LLC" o | r the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADDR. | ESS) | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | |
| B. If amending the registered agent and/or registered agent and/or the new registered office address here: | office address on our records, enter th | e name of the new registered |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida street address | |
| | Flori | da |
| | City | 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 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 |
|--------------|-------------|--------------------------|----------------|
| MGR | Alex Medina | 757 SE 17TH STREET #1190 | □Add |
| | | FT. LAUDERDALE, FL 33316 | ≣Remove |
| | | | ☐Change |
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| | Signature of a member or | authorized representativ | e of a member | -1,0 | ₹ :: |

Filing Fee: \$25.00

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| ed 04/25 | Signature of a member or aut | horized representative of | | he |