7/9/2015

# Florida Department of State 5392

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : UNION HSA LLC
Account Number : I20150000070
Phone : (954)770-6227

Fax Number : (954)369-4446

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address	<u></u>
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#### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

### JM2CALI LLC

 Certificate of Status
 0

 Certified Copy
 0

 Page Count
 04

 Estimated Charge
 \$25.00

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#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JM2CALI LLC	•
(Name of the Limited Liability Company as it now appears on our records.)  (A Florida Limited Liability Company)	'n
	assigned-
Florida document number L15000095392	9
This amendment is submitted to amend the following:	E O
A. If amending name, enter the new name of the limited liability company here:	70
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation	"L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our records, enter the nan registered agent and/or the new registered office address here:	e of the new
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street address	<del></del>
, Florida	

#### 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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

Title	Name	Address	Type of Action
AMBR	Joso Marcio A Vieira	4701 Vero Beach Place	
		Kissmmee, FL 34746	□ Remove
			D Change
AMBR	Cristiana J Vieira	4701 Vero Beach Place	
•		Kissimmee, PL 34746	Remove
			Change
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Page 3 of 3

## ARTICLES OF DISSOLUTION OF DG & CR, LLC

The undersigned, as Members of DG & CR, LLC, a Florida limited liability company (the "Company") hereby file these Articles of Dissolution, pursuant to the provisions of Section 605.0707 of the Florida Statutes, as follows:

- 1. The name of the limited liability company is DG & CR, LLC.
- The Articles of Organization of the Company were filed on January 26, 2007 under File No. L07000010270.
- The date the dissolution was approved as June 26, 2015.
- 4. The Members, by written consent, elected to dissolve the Company and directed each Member to execute and deliver these Articles of Dissolution.

IN WITNESS WHEREOF, the undersigned have set their hands and seals on behalf of the Company this 30th day of June, 2015.

David G. Malt

C. Richard Malt

15 JUL -9 AM 7: 11
SECRETARY OF STATE

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