

**215 000 112042**

Florida Department of State  
Division of Corporations  
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
HIG-TWO L.L.C.

Certificate of Status	0
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AUG 27 2015

J SHIVERS

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8/25

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** HIG-Two L.L.C.

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Michael Melrose**

Name of Person

**Baker & McKenzie LLP**

Firm/Company

**1111 Brickell Ave., Suite 1700**

Address

**Miami, FL 33131**

City/State and Zip Code

**michael.melrose@bakermckenzie.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Michael Melrose**

**305**

**789 8926**

at ( )

Name of Person

Area Code

Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy

**STATEMENT OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

**FIRST:** The name of the limited liability company is: HIG-Two L.L.C.

**SECOND:** The Florida Document number of the limited liability company is: L15000112042

**THIRD:** Document to be corrected is:  
Articles of Organization

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT**

Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

There is a typo in the manager's last name.

Manager's correct name is: Maria Pia Herrera.

15 AUG 25 AM 7:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**OR**

Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OR**

The electronic transmission of the record was defective.

Is/Maria Pia Herrera August 26, 2015  
Signature of Authorized Representative Date

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)