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(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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TO ACKNOWLEDGE SUFFICIENCY OF FILING

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R MASON

### CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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HILLSBORO WAI	LMERT LLC			
		-	7	
			-	
				Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
			<u> </u>	L.C. File
				Fictitious Name File
				Trade/Service Mark
			<u> </u>	Merger File
			<b>✓</b>	Art, of Amend, File
				RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
				Cert. Copy
			<u> </u>	Photo Copy
			l	Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
				Fictitious Search
Signature		<del> </del>		Fictitious Owner Search
Signature				Vehicle Search
			·	Driving Record
Requested by: Seth	04/00/15			UCC 1 or 3 File
	$\frac{04/29/16}{5}$			UCC 11 Search
Name	Date	Time		UCC 11 Retrieval
Walk-In	Will Pick Up			Courier

#### **COVER LETTER**

Division of Co	ection rporations		
SUBJECT: HILLSBOY	RO WALMART LLC		
	Name of Li	mited Liability Company	
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.	
Please return all correspo	ndence concerning this matte	r to the following:	
•	ROBERT SOCOL		
•		Name of Person	<del></del>
	ARS & ASSOCIATES IN	ic ·	
		Firm/Company	
	20810 WEST DIXIE HIG	HWAY	•
		Address	
	MIAMI, FL 33180		
		City/State and Zip Code	_
	ROB@ARSACCOUNTING	G.COM (to be used for future annual report not)	
For further information co	ncerning this matter, please c	•	meadony
ROBERT SOCOL		305 653-7350	
Name of	Person	at ()	e Telephone Number
	,		
Enclosed is a check for the	e following amount:	•	
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclose)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Taliahassee, FL 32314

TO:

STREET/COURIER ADDRESS: Registration Section

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

## HILLSBORO WALMART LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{07/30/2015}{1}$ and assigned Florida document number L15000130499 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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: 1 (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 name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

#### 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

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>	Name	Address	Type of Action
MGR	VARINDER MANN	20810 W DIXIE HIGHWAY	
		MIAMI, FL 33180	■ Remove
			□ Change
MGR	MOHAMMAD W AKHTAR	22112 MARTELLA AVENUE	
		BOCA RATON, FL 33433	Remove
		· · · · · · · · · · · · · · · · · · ·	Change
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160	Signature o	of a member or authori	zeu representative o	TARY	السامر	

Filing Fee: \$25.00

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