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(Re	equestor's Name)	
(Ad	dress)	<u></u>
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO:					
CIID IE4					
SUBJEC	L1; _			ited Liability Company	
The encl	losed A	Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn a	ll correspor	ndence concerning this matter	to the following:	
			CARLOS FIGUEIRA		
	Division of Corporations HAMMOCKS 15103 LLC Name of Limited Liability Company e enclosed Articles of Amendment and fee(s) are submitted for filing. ase return all correspondence concerning this matter to the following:				
CLFC AND ASSOCIATES LLC Firm/Company					
				Firm/Company	erson pany S Zip Code re annual report notification) 721-2988 Code Daytime Telephone Number ing Fee &
			8200 NW 41 STRREET S	Name of Limited Liability Company The standard fee(s) are submitted for filing. The standard fee(s) are submitted feet filing. The standard feet filing. The standa	
				Address	
The enclos Please retu For further CARLOS			DORAL FL 33166		
	City/State and Zip Code				
			•		
			E-mail address: (to be used for future annual report notifi	cation)
For furth	er inf	ormation co	ncerning this matter, please ca	all:	
CARLO	S FIC	UEIRA			
		Name of	Person	Area Code Daytime	Telephone Number
Enclosed	i is a c	heck for the	e following amount:		
\$25.0	00 Fil	ing Fee		Certified Copy	Certificate of Status & Certified Copy

MAILING ADDRESS:

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

HAMMOCKS 15103 LLC

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

(A Florida Limited Liability Company)

(A	Florida Limited Liability Company)	
The Articles of Organization for this Limited Liabi Florida document number L1600000278	lity Company were filed on 01/04/2016	and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of th	e limited liability company here:	
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicabl	e:	
(Principal office address MUST BE A STREET A	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		
registered agent and/or the new registered office	address nere:	SSE 23
Name of New Registered Agent:		
New Registered Office Address:		27 en
	Enter Florida street address	25
_	, Florid	la
	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 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>	<u>Name</u>	Address	Type of Action
MGR	VANESSA D ALVAREZ PARES	6855 EDGEWATER DR. APT IC	■ Add
		MIAMI FL 33133	□ Remove
			☐ Change
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Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be prior to date of filing or mo Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	(optional) ore than 90 days after filing.) Pursuant g requirements, this date will not b	to 605.0207 be listed as
ne record specifies a delayed effective date, but not an effective ti The 90th day after the record is filed.	ime, at $12:01$ a.m. on the	earlier of
Dated AUGUST 22 , 2016		

Typed or printed name of signee