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COVER LETTER

TO: Registration Sec Division of Corp		•	
SUBJECT: HIDE	AWAY NELRAY	1 1 C.	
SUBJECT:	AWAY DELRAY Name of Limi	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	CLINTON	V PHILLIPS STEVE	NS
		Name of Person	
	HIDEAWAY DI	ELRAY LLC	
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
	2457 SUND	Y Av E Address	
		Address	
	DELRAY BEA	CH, FL 33444 City/State and Zip Code	
	ORISART@GMA		
For further information co	oncerning this matter, please ca	dl:	
CLINT ST	EVENS	at (<u>5(el</u>) <u>414 - 990</u> Area Code Daytime	73 Telephone Number
ruine of		. aca code Dayinio	provide a rumous
Enclosed is a check for th	e 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 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

HIDEAWAY DELRAY	LLC	
(Name of the Limited Liability (A Florida L	Company as it now appears on our records. Limited Liability Company)	
The Articles of Organization for this Limited Liability Con	ompany were filed on MARCH 15T 2016	_ and assigned
Florida document number <u>L 1 6 0 0 0 0 4 7 1 0 1</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ted liability company here:	
The new name must be distinguishable and contain the words "Limite	ted Liability Company," the designation "LLC" or the abbrev	viation "L.L.C."
Enter new principal offices address, if applicable:		16 OCT I
(Principal office address MUST BE A STREET ADDRE	ESS)	
		LOCK OF ALL D
Enter new mailing address, if applicable:	water to the state of the state	
(Mailing address MAY BE A POST OFFICE BOX)		2 5
		
B. If amending the registered agent and/or registered agent and/or the new registered office addresses		name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
-	, Florida	Zip Code
	·	Zip Code
New Registered Agent's Signature, if changing Registered		
I hereby accept the appointment as registered agent as provisions of all statutes relative to the proper and con accept the obligations of my position as registered age	mplete performance of my duties, and I am fam	iliar with and

If Changing Registered Agent, Signature of New Registered Agent

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
AMBR	Clinton Phillips Stevens	1045 E. Atlantic Aven	طي∟ Add
		Delray Beach, FL 33483-6	955 P Remove
			☐ Change
MGR	Clinton Stevens	2457 Sundy Ave	™ Add
		Delray Beach, FL 33444-	2127 🗆 Remove
			Change
MGR	Gerard Chachia	708 S. Atlantic Drive	Add
		Lantana, FL 33462	Remove
			☐ Change
			Remove T
			Change T
			Add OCCOP CONTROL Add
			A A A A A A A A A A A A A A A A A
			Remove
		 	☐ Change
			Add
			☐ Remove
			Change

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			·					
Effective	date, if other than th	e date of filin	10.			(optionał)		
(If an effective Note: If t	ve date is listed, the date m he date inserted in this l 's effective date on the	ust be specific an block does not:	d cannot be price meet the appli	r to date of filing cable statutory:	or more than 90 day	ys after filing.) I		
	d specifies a delaye Ith day after the re			ot an effectiv	ve time, at 12	:01 a.m. o	n the earlie	r of:
Dated	10/10/10		, 	······································				
	·	11	Ala:	0				
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Filing Fee: \$25.00