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COVER LETTER

TO: Registration Se Division of Cor			
HHJ WOR	KS, LLC		
SUBJECT:	Name of Limi	ited Liability Company	
	Amendment and fee(s) are sub-	- ,	
	Heidi S. Webb		
		Name of Person	
	Attorney at Law		
		Firm/Company	
	140 South Beach Street Su	ite 310	
		Address	
	Daytona Beach, FL 32114		
		City/State and Zip Code	
	heidisuewebb@yahoo.com		
For further information c	e-mail address: (to be called a ddress) (to be called	to be used for future annual report notifica all:	2016 SEC TALL
Heidi S. Webb		386 257-3332 at ()	
Name o	f Person	Area Code Daytime T	elephone Number 23
Enclosed is a check for the	ne following amount:		ORID ORID
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	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

HHJ WORKS LLC		
(Name of the Limited Liability Co (A Florida Lim	mpany as it now appears on our recorited Liability Company)	'ds.)
The Articles of Organization for this Limited Liability Comp	pany were filed on 03/14/2016	and assigned
Florida document number L16000052551		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
he new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LL	C" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		·
Principal office address MUST BE A STREET ADDRESS	S)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 3. If amending the registered agent and/or registere	d office address on our record	ds, enter the name of the
egistered agent and/or the new registered office address	<u>nere</u> :	r 26 IATE JRIOA
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addr	400
	Enier Fioriaa Street adar	ess
		Florida
	City	гір Соае

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	ANDREW J. BALES	140 South Beach Street	Add
		Daytona Beach FL 32114	☐ Remove
			☐ Change
			Add
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Effective date, if other than the date of filing:			(optional)	
Note: If the date inserted in this block does not meet the	e applicable st	of filing or more than atutory filing requir	90 days after filing. ements, this date) Pursuant to 605.02 will not be listed a
document's effective date on the Department of State's	records.	•		
the record specifies a delayed effective date,	but not an	affective time la	t 12·01 a.m	on the earlier
The 90th day after the record is filed.	but not an		12:01 0	on the content
March 18 201	۷			
Dated March 18 , 201	·	•		
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Filing Fee: \$25.00