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## **COVER LETTER**

TO: Registration of	n Section Corporations		
SUBJECT.	H & E Manage	ment LLC	
SUBJECT:	Name of Limi	ited Liability Company	<del></del>
The enclosed Article	s of Amendment and fee(s) are sub-	mitted for filing.	
Please return all corr	espondence concerning this matter	to the following:	
	Elba Aguayo		
		Name of Person	
		Firm/Company	<del>*************************************</del>
	31912 Grand Reserve Plac	e	
	<del></del>	Address	<del></del>
	Wesley Chapel, FL 33545		
		City/State and Zip Code	<u> </u>
	elbasranch@gmail.com		
	E-mail address: (1	to be used for future annual report notific	ration)
For further informati	on concerning this matter, please ca	ali:	2018
Elba Aguayo		646 831-8288 at ( )	
Nε	me of Person		Telephone Number 3 3
Enclosed is a check	for the following amount:	•	533
\$25.00 Filing Fe	e \$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 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

H & E	E Management LLC	
(Name of the Limited Liab (A Flor	bility Company as it now appears on our records.) rida Limited Liability Company)	
The Articles of Organization for this Limited Liability	Company were filed on June 30, 2016	and assigned
Florida document number L16000125045	·	
This amendment is submitted to amend the following:	:	
A. If amending name, enter the new name of the li	imited liability company here:	
The new name must be distinguishable and contain the words "l	cimited Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office ac		Acceptance of the second secon
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	E	To To
	Enter Florida street address	ا دران مستوری دران دران
_	, Flori	
	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
AMBR	Elba Aguayo	31912 Grand Reserve Place	<b>■</b> Add
		Wesley Chapel, FL 33545	Remove
			□ Change
AMBR	Edwin H. Aguayo	31912 Grand Reserve Place	
		Wesley Chapel, FL 33545	□ Remove
			■ Change
			Add
		<del></del>	☐ Remove
			Change
			Remove <sub>7</sub>
			Change
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			☐ Remove
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			☐ Change

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Filing Fee: \$25.00