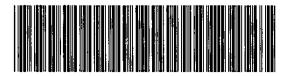
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SECRETARY OF STATE VALLAHASSEE, FLORIDA

FILED

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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 2, 2016

EVAN RAPOPORT 105 S NARCISSUS AVE, STE 701 WEST PALM BEACH, FL 33401

SUBJECT: HEDGECO MANAGEMENT LLC

Ref. Number: L16000158178

We have received your document for HEDGECO MANAGEMENT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 816A00023502

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www.sunbiz.org

Division of Corporations P.O. ROY 6397 Tollahassas Florida 39314

COVER LETTER

Division of Cor	rporations		
) MANAGEMENT LLC		
SUBJECT:	Name of Limited Liability Company s of Amendment and fee(s) are submitted for filing. espondence concerning this matter to the following: EVAN RAPOPORT Name of Person HEDGECO MANAGEMENT LLC Firm/Company 105 S OUTH NARCISSUS AVENUE, SUITE: 701 Address WEST PLAM BEACH, FLORIDA 33401 City/State and Zip Code ROSEMARIE@HEDGECOVEST.COM E-mail address: (to be used for future annual report notification) On concerning this matter, please call: Area Code Area Code Daytime Telephone Number S 60.00 Filing Fee, Certificate of Status & Certificate of Status & Certificate of Status & Certificate Copy Certificate Copy (additional copy is enclosed)		
The enclosed Articles of	lease return all correspondence concerning this matter to the following: EVAN RAPOPORT		
Please return all correspo	ondence concerning this matter	to the following:	
	EVAN RAPOPORT		
	-	Name of Person	
	HEDGECO MANAGEME	ENT LLC	
	···	Firm/Company	
	105 S OUTH NARCISSU	S AVENUE, SUITE: 701	
		Address	-141.5
	WEST PLAM BEACH, FI	LORIDA 33401	
		City/State and Zip Code	
	ROSEMARIE@HEDGECO	OVEST.COM	7
	E-mail address: (to be used for future annual report notification	
For further information of	concerning this matter, please c	all:	NOV NOV
ROSEMARIE LOSARD	00		m _e .
			FLORIG
Enclosed is a check for the	ne tollowing amount:		
\$25.00 Filing Fee		Certified Copy	Certificate of Status &

TO:

Registration Section

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

HEDGECO MANAGEMENT LLC

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

	3,		
The Articles of Organization for this Limited L	Liability Company were filed on $\frac{08/16}{1}$	/2016	and assigned
Florida document number L16000158178	·		
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name of	of the limited liability company here	:	
The new name must be distinguishable and contain the	words "Limited Liability Company," the design	gnation "LLC" or the abb	previation "L.L.C."
Enter new principal offices address, if applie	cable:		
(Principal office address MUST BE A STREE	ET ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	· · · · ·	
B. If amending the registered agent and		ur records, <u>enter t</u>	the name of the new
registered agent and/or the new registered o	ffice address here:	ĬΑL	୬ ଅ ୪
Name of New Registered Agent:	JOE GOLDSTEIN	LAHA	A S T
New Registered Office Address:	105 SOUTH NARCISSUS AVENUE	E, SUITE: 701	
	Enter Florida	street address	
	WEST PALM BEACH	, Florida 📆	<u> हा ूँ 🖰</u>
	City	Kijis Kijis	Zip <u>Čo</u> de
New Registered Agent's Signature, if changing	Registered Agent:	, ۱.۰.	•
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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 Agen,

ionature 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>	<u>Address</u>	Type of Action
AMBR	EVAN RAPOPORT	105 SOUTH NARCISSUS AVEE	
		SUITE: 701	☐ Remove
		WEST PALM BEACH, FL 33401	
			
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			Remove
			□ Change

	Iffective 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 more than 90 days after filing Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date locument's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m.			
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(If an e	Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after f If the date inserted in this block does not meet the applicable statutory filing requirements, this	iling.) Pursu	ant to 605.	
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.e 90th day after the record is filed.	m. on th	ne earlie	er of
Dete	/			
Dated				
	Signature of a member or authorized representative of a member			

Page 3 of 3

Typed or printed name of signce

Filing Fee: \$25.00