## 116000172700

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## **COVER LETTER**

TO:	Registration Sec Division of Corp			
CUD 1E	HA Florida,	LLC		
SUBJE	ul:	Name of Lim	ited Liability Company	
The encl	losed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspor	ndence concerning this matter	to the following:	
		Stephen M. Feldman		
			Name of Person	
		Finkel Whitefield Selik		
			Firm/Company	
		32300 Northwestern Hwy,	Suite 200	
			Address	
		Farmington Hills, MI 483	334	
			City/State and Zip Code	
		sfeldman@fwslaw.com	to be used for future annual report notifi	antian)
For furth	ner information co	oncerning this matter, please co	·	Cation)
Stephen M. Feldman			248 855-6500 at ( )	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed	d is a check for th	e following amount:		
<b>j</b> \$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

HA Florida, LLC	
( <u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records.) ited Liability Company)
The Articles of Organization for this Limited Liability Comp	pany were filed on 9/7/2016 and assigned
Florida document number L16000172700	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	liability company here:
The new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS	
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Enter new mailing address, if applicable:	The second secon
(Mailing address MAY BE A POST OFFICE BOX)	平 F:
	<u> </u>
B. If amending the registered agent and/or registere registered agent and/or the new registered office address	d office address on our records, <u>enter the name of the n</u> <u>here</u> :
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	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>	<u>Address</u>	Type of Action
MGR	Louis Glazier	32300 Northwestern Hwy, Ste 200	
		Farmington Hills, MI 48334	■ Remove
			Change
Member	R. B. Humphreys, Inc.	5549 State Route 233	Add
		Rome, NY 13440	□ Remove
		· <u></u>	□ Change
President	Louis Glazier	32300 Northwestern Hwy, Ste 200	■ Add
		Farmington Hills, MI 48334	□ Remove
			Change
Treasurer	Marvin Van Slyke	2707 W County Road 44	
		Eustis, FL 32726	□ Remove
			Change
			<u> </u>
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Filing Fee: \$25.00