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COVER LETTER

TO:	Registration Sec Division of Corp			
CHID IE	YHV HOLI	DINGS, LLC		
SUBJE	 			
The enc	losed Articles of a	Amendment and fee(s) are sub-	mitted for filing.	
Please r	eturn all correspoi	ndence concerning this matter	to the following:	
		CHARLES P DEMARTIN	ſ	
			Name of Person	
		102 YACHT HARBOR DI	Firm/Company	
		<u> </u>	Address	
		PALM COAST, FL 32137	City/State and Zip Code	
		E-mail address: (to be used for future annual report notition	cation)
For furtl	her information ec	oncerning this matter, please co	ıll:	
CHARL	LES P DEMARTI	N .	516 317-2034 at ()	
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclose	d 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

YHV HOLDINGS, LLC						
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)					
The Articles of Organization for this Limited Liability Company Florida document number L17000104161	and assigned					
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited liab	ility company here:					
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."				
Enter new principal offices address, if applicable: 102 YACHT HARBOR DRIVE						
Principal office address MUST BE A STREET ADDRESS)	UNIT 480	19				
	PALM COAST, FL 32137	00				
Enter new mailing address, if applicable:	2496 NAVY PLACE					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	BELLMORE, NY 11710					
		3.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1				
3. If amending the registered agent and/or registered o		nter the name of the n				
registered agent and/or the new registered office address her	<u>e</u> :					
Name of New Registered Agent:						
New Registered Office Address:		-				
	Enter Florida street address					
	, Florid					
	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
AMGR	CHARLES P DEMARTIN	102 YACHT HARBOR DR - UNIT180	_□ Add
		PALM COAST, FL 32137	
			■ Remove
			Change
AMBR	VICTOR J LAGRECA	2496 NAVY PLACE	
			= Add
		BELLMORE, NY 11710	□ Remove
	CINDY LAGRECA	2496 NAVY PLACE	Change
AMBR	CINDY LAURECA	2470 NAV 1 FLACE	A
		BELLMORE, NY 11710	
			Remove
			2 Change
AMBR	VICTORIA A LAGRECA	2496 NAVY PLACE	30
		BELLMORE, NY 11710	
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atedA	harles t.	Signature of a	uton)						

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Filing Fee: \$25.00