L18000014871

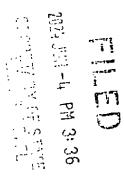
(Requestor's Name)
(Address)
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(Document Number)
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Name Chang

COVER LETTER

TO: Registration Section Division of Corporations	• • •	•	
SUBJECT: HiF, D15 Name of I	tribution; LL	<u>-C</u>	
The enclosed Articles of Amendment and fee(s) are s		· ·	
Please return all correspondence concerning this mat	ter to the following:		
E.	Dusty Aker Es	9:	
AKER	LAW FIRM P.A Firm/Company		
3400	S. TAMIAMI TR. Address	Ste. 101	
SALA	City/State and Zip Code City/State and Zip Code Caker lawfirm. Coss: (to be used for future annual report notification)	<u> </u>	
<u>dustyaker</u>	Es: (to be used for future annual report notification	on)	
For further information concerning this matter, pleas	e call:		
Namo of Person	at (94) 462-2 Area Code Daytime Tele	2024 JUN -4 PM 3:	
Enclosed is a check for the following amount:			
✓ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status	S55.00 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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HIFI DISTE		
(<u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our reconited Liability Company)	ords.)
The Articles of Organization for this Limited Liability Com	pany were filed on 1 17 11	and assigned
Florida document number <u>L18000014871</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited		
The new name must be distinguishable and contain the words "Limited	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 ADDRES	<u></u>	
Enter new mailing address, if applicable:		2024 SEC
(Mailing address MAY BE A POST OFFICE BOX)		
	<u>. </u>	- 55 ±
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	ffice address on our records, <u>en</u>	ter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ad	dress
		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.

3

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
		·····	□Remove
			☐ Change
			□Add
			□ Remove
			□ Change
			□ Add
			□Remove
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			□ Remove
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lf an effecti Note: If :	date, if other that we date is listed, the dath the date inserted in 's effective date on	ate must be specific this block does n	and cannot be of meet the a	pplicable statut	iling or more than tory filing require	(optional 90 days after filing ements, this dat	g.) Pursuant to 605.0	0207 (d as t
e record s rd is filed.	pecífies a delayed e	ffective date, but	not an effect	ive time, at 12:	01 a.m. on the e	arlier of: (b) T	he 90th day after	the
Dated	MAY	30	. 20	24/10				
		_		(1) 1				
		Signature of	of a member or	authorized tepro	esentative of a mer	nber		