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(Re	questor's Name)	
(Āda	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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SECRETARY OF STATE DIVISION OF CORPORATIONS

N COOPER MAY 07 2018

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COVER LETTER

	Registration Sec Division of Corp			
our tra		ERTIES LLC		
SUBJEC	.1: <u></u> _	Name of Limite	ed Liability Company	
The encl	osed Articles of	Amendment and fee(s) are subm	nitted for filing.	
Please re	eturn all correspon	ndence concerning this matter to	o the following:	
		MATTHEW J LONGO		
			Name of Person	
		HUG PROPERTIES LLC		
			Firm/Company	
		283 WILLIAM FLYD PKY		
			Address	
-		SHIRLEY, NY 11967	_	
-			City/State and Zip Code	
		MLONGO@PREMIERCOI		
			be used for future annual report notifi	.cation)
For furth	ner information co	oncerning this matter, please cal	ll:	
MATT I	LONGO		516 635-9639	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed	d is a check for th	ne following amount:		
□ \$ 25.	00 Filing Fee	□ \$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**

HUG PROPER	RTIES LLC	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on APRIL 3, 2018	and assigned
Florida document number L18000084749		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility 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:	283 WILLIAM FLYD PKY	
(Principal office address MUST BE A STREET ADDRESS)	SHIRLEY, NY 11967	
		G VISE
Enter new mailing address, if applicable:	283 WILLIAM FLYD PKY	FIL SION OF C MAY -3
(Mailing address MAY BE A POST OFFICE BOX)	SHIRLEY, NY 11967	DRPF
B. If amending the registered agent and/or registered or registered or registered agent and/or the new registered office address her		er the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	· · · · · · · · · · · · · · · · · · ·
	Lines Fibraia street dantess	
	, Florida _	Zip Code
New Registered Agent's Signature if changing Registered Agent.	•	- Process

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
MGMR	CHET FINKBEINER	3505 Veterans Hwy Ste D	
		Ronkonkoma, NY 11779	■ Remove
			Change
MGMR	MATTHEW J LONGO	283 William Flyd Pky	
		Shirley, NY 11967	□ Remove
			Change
			Add
-			Remove
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If an e <u>Note</u>	May 1, 2018 (optional) ffective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 62. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be beneat's effective date on the Department of State's records.		
			_
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear e 90th day after the record is filed.	iler c	or:
Dated	1 May 1 , 2018		
2000	· ,		

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Filing Fee: \$25.00