## 18000121590

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22 MAY -9 PM 2: 18

T. MATTHEWS
JUN 2 9 2022

## **COVER LETTER**

TO:

Registration Section

Div	ision of Cor	rporations	·	•
elibiret.		agement, LLC	· · ·	•
SUBJECT:			nited Liability Company	
The enclosed	I Articles of	Amendment and fee(s) are sub-	omitted for tiling.	
		ondence concerning this matter		
		Gregory Hendrix		
			Name of Person	
		HMR Managment, LLC		
		_	Firm/Company	
		5020 Clark Road, # 134		
			Address	
		Sarasota, FL 34233		
			City/State and Zip Code	<del></del>
		ghendrix417@gmail.com		
		E-mail address: (	to be used for future annual report	notification)
For further in	iformation e	oncerning this matter, please c	all:	
Greg Hendri	X		770 842-6512	?
	Name o	f Person	Area Code Day	rtime Telephone Number
Enclosed is a	chock for th	ne following amount:		
		-	_	
■ \$25.00 F	iling 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)
	ling Addres		Street Address	
	gistration S		Registration	
		orporations	Division of C	•
	). Box 632 lahassee, <b>I</b>			d'Tallahassee
rat	ianassee, I	L 24314	2415 N. Mor	rroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF TARY OF STATE OF ORPORATIONS

If Changing Registered Agent, Signature of New Registered Agent

22 MAY -9 PH 2: 18

HMR Management, LLC

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

The Articles of Organization for this Limited Liability Company w	vere filed on May 15.	. 2018	and assigned
Florida document number L18000121590			·
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company here:		
The new name must be distinguishable and contain the words "Limited Liabilit	y Company." the designa	ition "LLC" or the abbrevi	ation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			<u>.</u>
Training material Military		71.	
B. If amending the registered agent and/or registered office ad agent and/or the new registered office address here:  Name of New Registered Agent:		ds, <u>enter the name of</u>	
New Registered Office Address:	Enter Florida sti		
	Enter Fiorida si	rect dddress	
<del></del>	City	Florida 	ip Code
New Registered Agent's Signature, if changing Registered Agent:	•	_	<b>,</b>
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	erformance of my a ovided for in Chapi	luties, and I am famil er 605, F.S. Or, if th	iar with and is document is

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
AMBR	Ronda Willis	5020 Clark Road # 134, Sarasota, FL 34233	□Add
			■Remove
			□Change
<del></del>			🗆 Add
			□Remove
			□ Change
<u>.                                    </u>	<del></del>		🗆 Add
			🗆 Remove
			□ Change
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		<u> </u>				
	-			·	-	
	<del></del>			<del>-</del> -		
Effective	date, if other than	the date of fili	12/31/2021	1	(optic	anal)
(If an effecti Note: If t	ive date is listed, the date	e must be specific a is block does not	nd cannot be prio meet the appli	cable statutory fili	nore than 90 days after	filing.) Pursuant to 605.020 s date will not be listed a
he record so ord is filed.	pecifies a delayed effi	ective date, but no	ot an effective t	time, at 12:01 a.m.	on the earlier of: (b	) The 90th day after the
Dated	ay 2	71	2022	·		
	1 / h.	70 /	7			
	- 14	RIXX	u			
	-	Signature of a	a member or auth	orized representativ	e of a member	<del></del>
	Gregory Hendrix	Signature of a	a member or auth	norized representativ	e of a member	

Filing Fee: \$25.00