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(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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2018 NOV - 1 - Ain 2018

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Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.Incserv.com

e-mail: accounting@incserv.com

ORDER FORM

TO Florida Department of State
Division of Corporations, Clifton
Building
2661 Executive Center Circle
Tallahassee, FL 32301
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Stops mstops@incserv.com 850.656.7953

REQUEST DATE 11/1/2019

PRIORITY Routine

OUR REF # (Order ID#) 779540

ORDER ENTITY
HANK GROUP LLC

PLEASE PERFORM THE FOLLOWING SERVICES: HANK GROUP LLC (FL)

File the attached amendment

NOTES:

\$25.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Friday, November 01, 2019 Page 1 of 1

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HANK GROUP LLC		
(Name of the Limited Liability Compa (A Florida Limited	ny as it now appears on our reco- Liability Company)	rds.)
The Articles of Organization for this Limited Liability Company lorida document number L18000163454	were filed on 7/5/2018	and assigned
his amendment is submitted to amend the following:		
If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LL	C" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)	····	
		· · · · · · · · · · · · · · · · · · ·
		:
nter new mailing address, if applicable:		
Aailing address MAY BE A POST OFFICE BOX		
		:
. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here	ffice address on our record e:	ds, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		· · · · · · · · · · · · · · · · · · ·
	Enter Florida street addre	?\$\$
	City F	Torida
	Cu's.	ыр сыас

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>	Address	Type of Action
MGR	INFANTE AGUILAR, ALLEN HENRY	2234 North Federal Hwy #1065 Boca Raton, FL 33431	
			■ Remove
	Christophu D. I		Change
MGR	AGR Christopher R. Longo	1122 Buttonwood Street Lebanon, PA 17046	■ Add
			☐ Remove
			☐ Change
			Remove
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Effective date, if other than the fan effective date is listed, the date mus Note: If the date inserted in this blodocument's effective date on the Defective date.	t be specific and cannot be ock does not meet the ap	prior to date of filing or moplicable statutory filin	g requirements, this date	.) Pursuuni to 605.0207 (
ne record specifies a delayed The 90th day after the reco		t not an effective t	ime, at 12:01 a.m.	on the earlier of:
November I	2019	·		
	11	•		
	Signature of a member or			

Page 3 of 3

Filing Fee: \$25.00