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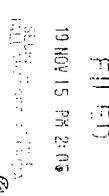
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	ision of Corp			·	
SUBJECT:	Hawlet, LLC				
oobvect.					
The enclosed	d Articles of A	Amendment and fee(s) are subr	nitted for filing.	,	
Please return	all correspor	dence concerning this matter t	to the following:		
		David C. Camerini			
	Name of Person				
		Fox Horan & Camerini LL	P		
	Firm/Company				
		885 Third Avenue, 17th Floor			
	Address				
		New York, New York, 10022			
	City/State and Zip Code				
		dccamerini@foxlex.com			
		E-mail address: (to be used for future annual report notif	ication)	
For further i	nformation co	oncerning this matter, please ca	dl:		
David C. Ca	amerini		212 480-4800		
	Name u	Person	at ()	: Telephone Number	
Enclosed is	a check for th	e following amount:			
\$25.001	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 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

Hawlet, LLC			
(Name of the Limited Liability (A Florida Li	Company as it now appears on our records.) mited Liability Company)		
The Articles of Organization for this Limited Liability Com Florida document number L18000193232		_and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	d liability company here:		
The new name must be distinguishable and contain the words "Limited	Liability Company " the designation "LLC" or the abbre	eviation "I I C"	
Enter new principal offices address, if applicable:	and the second s		
(Principal office address MUST BE A STREET ADDRES	200	<u> </u>	
The state of the s	101		
Enter new mailing address, if applicable:	c/o Fox Horan & Camerini LLP	ু ক	
(Mailing address MAY BE A POST OFFICE BOX)	885 Third Avenue, 17th Floor	=====================================	
	New York, New York 10022		
B. If amending the registered agent and/or register registered agent and/or the new registered office address Name of New Registered Agent:	ed office address on our records, <u>enter the</u> s here:	e name of the new	
New Registered Office Address:			
	Enter Floridu street oddress		
-	, Florida	7	
New Registered Agent's Signature, if changing Registered A	•	Zip Code	
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compacted the obligations of my position as registered agen being filed to merely reflect a change in the registered company has been notified in writing of this change.	— I agree to act in this capacity. I further agree plete performance of my duties, and I am fan It as provided for in Chapter 605. F.S. Or. if.	niliar with and this document is	
Ī	f Changing Registered Agent, Signature of New Regist	ered Agent	

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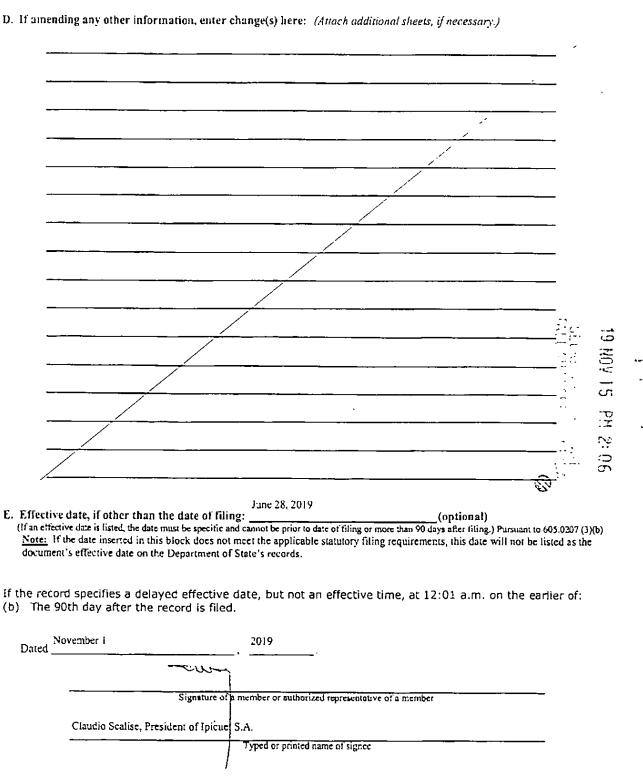
If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Munager

AMBR = Authorized Member

Address c/o Fox Horan & Camerini LLP <u>Title</u> Type of Action <u>Name</u> Eador, LLC 885 Third Avenue, 17th Floor MGR _□ Add New York, New York 10022 _□ Remove ■ Change □ Add □ Remove ☐ Change □ Add □ Remove □ Change □ Add ☐ Remove Change . Çbb∧ □ _□ Remove ☐ Change _□ Add □ Remove _□ Change

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