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COVER LETTER

TO: Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Div	ision of Co	porations		
SUBJECT:	HLA LLC			
Sobject.		Name of Lin	ited Liability Company	
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspo	ondence concerning this matter	to the following:	
		Brian George		
			Name of Person	
		Calas Group		
			Firm/Company	
		777 SW 37th Ave, Suite 5	10	
			Address	
		Miami, FL 33135		;
	City/State and Zip Code			
		bgeorge@calas.us	to be used for future annual report notific	
For further in	iformation c	oncerning this matter, please c	·	J
Brian George	e		305 4955222	, 1 (2)
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is a	check 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)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		ING ADDRESS:	STREET/COURIE	
		ration Section on of Corporations	Registration Section Division of Corpora	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HLA, LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp. Horida document number $\frac{\text{L}18000276339}{\text{L}}$.	pany were filed on November 29, 2018	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
he new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	<u> </u>	
		+ 1
nter new mailing address, if applicable:		•
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered egistered agent and/or the new registered office address		er the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
	City , Florida	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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Amalio Esposito	Residencia La Cascada	7
		Edificio Karuay, Calle	
		Edition Harday, Care	■ Remove
		31. Valera- Trujillo	□ Change
	Henry Esposito	Residencia La Cascada	D Change
MGR			
		Edificio Karuay, Calle	
		31, Valera- Trujillo	■ Remove
		Ji. Valeta- Trujino	□ Change
			Add
			Remove
			□ Change
			E./ □ Remove
			☐ Change
			Add
			☐ Remove
			Change
			Add
			☐ Remove
			□ Change

amending any other information, enter change(s) here:	(Mach Cadalona Sheets, 17 hecessary.)
	
	
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	U)
fective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to ote: If the date inserted in this block does not meet the applicate cument's effective date on the Department of State's records.	(optional) o date of filing or more than 90 days after filing.) Pursuant to 605.020
record specifies a delayed effective date, but not The 90th day after the record is filed.	an effective time, at 12:01 a.m. on the earlier o
December 6th 2018	_·
Signature of a member of author	ized representative of a member

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Filing Fee: \$25.00