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(Re	equestor's Name)	
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(В	usiness Entity Name)	. <del></del>
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Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	<del>-</del>
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022 OCT 28 AM 9: 4.3

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## **COVER LETTER**

FO: Registration Section Division of Corporations		
SUBJECT: Hedge Finsurance Group LLC Name of Limited Liability Company		
The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  ELIAE HOLLOWAY	2022 OCT 28 AM 9: 43	FILED
Hedge Invance Group LLC Firm/Company	•	
12101 N Nebraska Ove Stell Address		
Contact the posed and I report nonfication)  Contact the posed for future annual report nonfication)		
For further information concerning this matter, please call:  Elija Hollaway at 813  Name of Person Area Code Daytime Telephone Number	<del>-</del>	
S25.00 Filing Fee \$\to\$ \$30.00 Filing Fee & \$\to\$ \$55.00 Filing Fee & \$\to\$ Certificate of Status \$\to\$ (additional copy is enclosed) \$\text{Certified Copy} (additional copy}\$	Status (	
Mailing Address:  Street Address:  Pagintentian Spatian		

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassec, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO

ARTICLES OF ORGANIZATION
ARTICLES OF ORGANIZATION  OF  OF  OF  OF  OF  OF  OF  OF  OF
Game 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 were filed on 22727 2019 an assigned Florida document number 4 19000 57143
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here: .
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS) 12101 N Nebraska Cuce Se
Tampa, FC 336/2
Enter new mailing address, if applicable:
Mailing address MAY BE A POST OFFICE BOX)  12101 N. Nebraska ave SteC  Tampa, FC 33612
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered
agent and/or the new registered office address here:
Name of New Registered Agent: Lynh Wolhung
New Registered Office Address: 1201 N Nebraska Ave Ste C  Enter Florida street address
TAMPA Florida 33617
with page 21.30

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 amend or remov	ing ed	Authorized Pe from our record	rson(s) authorized ( ds:	o m	anage, enter the title, name, and address of each	person being added
MGR =	M		,			
Title .		<u>Name</u>			Address	Type of Action
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). If amo	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ive date, if other than the date of filing:
he recor ord is fi	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
Dated	10.24.2022 ,
	. 1 1 1
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member  Elijah Molloway  Typed or printed name of signee