 	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UF	P MAIL MAIL
	(Business Entity Name)
	(Document Number)
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Special Instructions	to Filing Officer

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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE : 534478 4311863
AUTHORIZATION: Spresse man
COST LIMIT : \$5.00
ORDER DATE : December 2, 2020
ORDER TIME : 12:17 PM
ORDER NO. : 534478-005
CUSTOMER NO: 4311863
DOMESTIC AMENDMENT FILING
NAME: COLQUITT LLC
EFFECTIVE DATE:
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XX CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

CONTACT PERSON: Amanda Robinson -- EXT#

COVER LETTER

TO: Registration Se Division of Cor			
Colquitt LL	.c		
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Carol Buckalew		
		Name of Person	, ···
	Blank Rome LLP		
		Firm/Company	
	130 N. 18th Street		
		Address	
	Philadelphia, PA 19103		
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	lication)
For further information c	oncerning this matter, please co	all:	
Carol Buckalew		215 988-6985	
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing 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)
Mailing Addres Registration S		Street Address:	tion
Division of C		Registration Sec Division of Cor	
P.O. Pay 422		TL - C CT	

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

COLQ	UITTLLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number L19000110757	were filed on April 4, 2019	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
Hahira LLC			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abb	reviation "L.L.C."	
Enter new principal offices address, if applicable:	370 Park Avenue, #41		
(Principal office address MUST BE A STREET ADDRESS)	Attn: Wayne Chambless		
	New York, NY 10022	·	
Enter new mailing address, if applicable:	370 Park Avenue, #41		
(Mailing address MAY BE A POST OFFICE BOX)	Attn: Wayne Chambless		
	New York, NY 10022		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	address on our records, enter the name	of the new registered	
	, Florida		
	City	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, 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
			□Add
			□Remove
			□Change
			□ Remove
		 	
			□Add
			□Remove
			☐ Change
			□Add
			□Change
			□Add
			□Remove
			☐Change
			
			Remove
			□ Change

.	
lf un effect <u>Note:</u> If	e date, if other than the date of filing:
rd is filed	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 l.
Dated _	Signature of a member or authorized representative of a member
	21/1/20
	Signature of a member or authorized representative of a member
	Wayne Chambless
	Typed or printed name of signee

Filing Fee: \$25.00