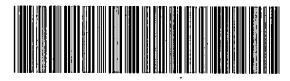
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MAILING ADDRESS:

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**

HH Strategic Lead	Agency I.L.C.	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	pany as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number	v were filed on 5/10/19 and assigned	
This amendment is submitted to amend the following:	(A Florida Limited Liability Company) ion for this Limited Liability Company were filed on	
A. If amending name, enter the new name of the limited liab	bility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ility 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)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	ffice address on our records, enter the name of the n	<u>.ew</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
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 adde or removed from our records:					
	MGR = Manager AMBR = Authorized Member				
Title	<u>Name</u>	Address	Type of Action		
MGR	Demetria C. Harris	on 4360 Deerwood Lake F Jacksonville, FL 32216			
AA (' O			Remove		
		4360 Deerwood Lake OK	Change		
1116K	Eric M. M. Dowell	4360 Deerwood Lake PK Jacksonville, FL 3221	Add		
			Remove		
			Change		
			Add		
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1.40.4.	e date, if other than the date of filing:
f the recor b) The 9	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: Oth day after the record is filed,
Dated	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member Demetria C. Harrison Typed or printed name of signee

Page 3 of 3

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