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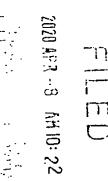
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Amend

APR 2 2 2020

COVER LETTER

TO:	Registration Sect Division of Corpo				
		D. Hubbert, 4	LC		
SUBJEC	71':	Name of Lim	ited Liability Company		· · · · · · ·
			,		
The encl	osed Articles of A	mendment and fee(s) are sub-	mitted for filing.		
Please re	turn all correspond	lence concerning this matter	to the following:		
		D	arryl Hubl	bert-	
			Hubbert,		
			Firm/Company		
		2401	Clare Side	e Drive	
		Valric	City/State and Zip Code	596	
			1 hubbert@ to be used for future annual		<u>n</u>
For furth	er information cor	seerning this matter, please ca		•	
		• .			
	Darr,	v1 Hubbert	at (7/7)	659-790	25
	Name of F	Person	Area Code	Daytime Telephone	Number
Enclosed	l is a check for the	following amount:			
₹\$2 5.	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee Certified Copy (additional copy is end	:losed) C	50.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)
	Mailing Address:		Street A	ddress:	
	Registration Se	ction		ation Section	
	Division of Co		_	n of Cornerations	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, 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 OF

D. Hubbert LLC (Name of the Limited Limited Limited L	ny as it now appears on our records.) liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 19000196135</u> .	
This amendment is submitted to amend the following:	<i>4.</i> ∙
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	8133 Setters Point Drive
(Principal office address MUST BE A STREET ADDRESS)	New Port Richey, FL 34653
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8133 Setters Point Drive New Port Richey, FL 34653
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I am familiar with and crovided for in Chapter 605, F.S. Or, if this document is

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
MGR	Darryl Hubbert		
			Remove
		8133 Setters Point drive New H	WHRichey FL 34653 St Change
			□Add
			□Remove
			Change
			
			Remove
			□Change
		·	□Remove
			□Change
			□Add
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			□Add
			□Remove
			□Change

If amendin	ig any other ii	nformation, enter	r change(s) here:	(Attach additio	nt il sheets, if ne	cessary.)	
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Note: If the	e date inserted ir	ian the date of fil date must be specific this block does no n the Department o	ing:and cannot be prior to out meet the applicable of State's records.	date of filing or mo e statutory filing	(opti re than 90 days afte requirements, th	ional) r filing.) Pursuant to s date will not be	605.0207 (listed as t
e record spec rd is filed.	cifies a delayed	effective date, but r	not an effective time	, at 12:01 a.m. or	n the earlier of: (t) The 90th day	after the
Dated	April	_5	2020 Malila	•			
		Door	Milled				
_	· · · · ·	Signature of	a member or authoriz	ed representative o	f a member		_
		Dar	ryl Hubb	ert			
_			Typed or printed r	name of signee			_

PHE P. COLOR