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2022 JUN 10 AM 10: 38

SECRETARY OF THE

COVER LETTER

TO:

Registration Section Division of Corporations

HM & RC INVESTMENTS LLC SUBJECT: 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: Name of Person CYNTHIA A PERETTI PA Firm/Company 14331 SW 120 ST STE 101 Address MIAMI, FL 33186 City/State and Zip Code ACCOUNTING@CYNTHIAPERETTIPA.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: CYNTHIA PERETTI Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, **■ \$25.00** Filing Fee Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Menroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 JUN 10 AM 10: 38

SECRETARY OF STATE AMASSEE, FLORE

AND LLAMASSEE, FLORE

2022 JUN 10 AM 10: 38

HM & RC INVESTMENTS LLC

(Name 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 $\frac{09}{2}$	0/09/2019	and assigned
Florida document numberL19000227913			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the Emited liabi	lity company h	ere:	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the	designation "LLC" or the	e 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 office a	ddress on our i	records, <u>enter the n</u>	ame of the new registered
agent and/or the new registered office address here:			
Name of New Registered Agent:			
			*
New Registered Office Address:	Finter #50	rida street address	
	City	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agroup provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as public being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of provided for in	f my duties, and La Chapter 605, F.S. (m familiar with and 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	Gregory R. Fishman, Esq.	2750 NE 185TH STREET SUITE 204	= Add
		AVENTURA, FL 33180	Remove
			Change
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			□Remove
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fan effective d <u>Note:</u> If the e	e, if other than thate is listed, the date mulate inserted in this before the late on the I	ust be specific and block does not m	cannot be prior t eet the applica	o date of filing or r ble statutory fili	nore than 90 days a	otional) fler filing.) Pursuant to this date wil! not be	605,0207 (listed as t
record speci d is filed.	les a delayed effecti	ve date, but not	an effective tir	ne, at 12:01 a.m.	on the earlier of:	(b) The 90th day a	ifter the
	3		2022	_•.			
Dated		·	\neg				
Dated	3	Signature of a m	nember of tuba	tized representativ	e of a member		

Filing Fee: \$25.00