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COVER LETTER

TO:

TO: Registration Se Division of Cor			
2118 18 678		THG REALTY, LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		TOMAS HERNANDEZ	
		Name of Person	
		THG REALTY, LLC	
	 	Firm/Company	
		8156 SOLDIERWOOD ST	
	· · · · · · · · · · · · · · · · · · ·	Address	
	V	/INTER GARDEN, FL 34787	
		City/State and Zip Code	
		В@ҮАНОО.СОМ	<u> </u>
For further information c	E-mail address: (concerning this matter, please c	to be used for future annual report noti all:	ffication)
TOMAS HI	ERNANDEZ	407 800-5151	
Name c	f Person		Telephone Number
Enclosed is a check for t	he 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)
<u>Mailing Addres</u> Registration (<u>Street Address:</u> Registration Se	ction
Division of C	Corporations	Division of Cor	rporations
P.O. Box 632 Tallahassee,		The Centre of T	l'allahassee le Street, Suite 810
rananassee, .	LIJ JAJ 14	ZHIJ IN, IMOHIO	e succe, suite arv

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THG REALTY,			
(<u>Name of the Limited Liability Company a</u> (A Florida Limited Liabil	vit now appears lity Company)	on our records.)	
The Articles of Organization for this Limited Liability Company were	e filed on	10-28-2019	and assigned
Florida document number L19000269740			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liability	company her	<u>'e</u> :	
The new name must be distinguishable and contain the words "Limited Liability C	ompany," the de	signation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
_			70
			200 FT
Enter new mailing address, if applicable:			温 日 二
(Mailing address MAY BE A POST OFFICE BOX)			13: 00 17
			= -
_			. ف
B. If amending the registered agent and/or registered office addragent and/or the new registered office address here:	ess on our rec	cords, <u>enter the na</u>	ame of the new egistered
Name of New Registered Agent:			
New Registered Office Address:	E Classic	la street address	
	vaner v torta	u sireet adaress	
	<i>(</i> ''h	Flerida	Zip Code
	City		гір с оае

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
MGR	OLGA L. SANCHEZ	10148 MALPAS POINT, ORLANDO, FL 32832	= Add
			□Remove
			□Change
			🗆 Add
			□Remove
			🗆 Add
			□Remove
			□Change
			□ Add
			□Remove
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		· · · · · · · · · · · · · · · · · · ·	□Remove
			🗆 Change
			□Add
			□Remove
			□Change

**	any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
 		
•		
<u>te:</u> If the di	e, if other than the date of filing:)207 d as
cord specifi s filed.	ies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	the
ed <u>D1</u> -	- 27-2020	
	Signature of a member of authorized representative of a member	
	TOMAS HERNANDEZ	
	Typed or printed name of signee	

Filing Fee: \$25.00