## L19000278088

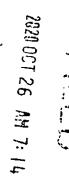
(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## COVER LETTER

TO:

TV: Registration Se Division of Cor			
	ird Property Management, LLO	C	ı
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
	ondence concerning this matter	_	
	Starlett M. Massey		
		Name of Person	
	Massey Law Group, P.A.		
		Firm/Company	
	P.O. Box 262		
		Address	<del> </del>
	St. Petersburg, FL 33731		
		City/State and Zip Code	
	smassey@masseylawgroup	•	
For further information e	E-mail address: ( oncerning this matter, please c	to be used for future annual report no all;	tification)
Starlett M. Massey	Ç ,	813 868-5601	
Name o	f Person	at () Area Code Daytii	me 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 5		Street Address: Registration S	ection
Division of C		Division of Co	
P.O. Box 632	27	The Centre of	
Tallahassee, 1	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

## ARTÍCLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hummingbird Property Manageme	nt, LLC	
( <u>Name of the Limi</u>	ed Liability Company as it now appe (A Florida Limited Liability Company)	ars on our records.)
The Articles of Organization for this Limited L	iability Company were filed on $\frac{1}{2}$	1/07/2019 and assigned
Florida document number L19000278088		3
This amendment is submitted to amend the foll	owing:	
A. If amending name, enter the new name o	f the limited liability company l	
The new name must be distinguishable and contain the v	vords "Limited Liability Company," the	designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applie	able:	
(Principal office address MUST BE A STREE	ET ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	BOX)	
B. If amending the registered agent and/or agent and/or the new registered office addre	• *	records, enter the name of the new register
Name of New Registered Agent:		
New Registered Office Address:	76 4th Street #262	
	Enter Fi	lorida street address
	St. Petersburg	, Florida <sup>33731</sup>
	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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being a or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Remove
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an effective da <u>Sote:</u> If the d	e, if other than the te is listed, the date must the inserted in this blo ective date on the De	t be specific and ca ock does not mee	unnot be prior to da et the applicable			ing.) Pursuant to 605.	
record specif	ies a delayed effective	e date, but not ar	i effective time,	at 12:01 a.m. on t	ne earlier of: (b)	The 90th day after	the
d is filed.			_				
	October 1	9	2020				
	October 1	9	2020				