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(Re	equestor's Name)	
(Ad	dress)	
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COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

Hillsborugh	i High School Class of 2012 R	eunions LLC	, .
	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:	
	Malasia Q. McDuffie, Esq		
		Name of Person	
		Firm/Company	
	13116 Oneida Street		
		Address	
	Spring Hill, FL 34609		
		City/State and Zip Code	
	malasia,meduffie@yahoo.co		<u>.</u>
		to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c	all:	
Malasia McDuffie, Esq.		813 508-2524 at ()	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for th	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 S		<u>Street Address:</u> Registration Sec	ction
Division of C		Division of Cor	
P.O. Box 632	7	The Centre of T	`allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hillsborugh High School Class of 2012 Reunions LLC

(Name of the Limited Liability Compa (A Florida Limited L	<u>iv as it now appears on our reco</u> aability Company)	<u>ords.)</u>
The Articles of Organization for this Limited Liability Company	were filed on November 5, 20	021 and assigned
Florida document number 1.21000479315		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
Hillsborough High School Class of 2012 Reunions LLC		
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the designation "LI	LC" 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)		2021
.		· う
B. If amending the registered agent and/or registered office a	ddress on our records, <u>ent</u> o	er the name of the new registered
agent and/or the new registered office address here:		PH 12:
		: ₩ %
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		
	Enter Florida street addr	ress
	I	Florida
	Cuy	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as paking filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, v rovided for in Chapter 605	and I am familiar with and 5, 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>	Name	<u>Address</u>	Type of Action
			□Add
			Remove
			□ Change
			□Add
			□Remove
			□Change
			Remove
			□Change
			□Add
			Remove
			Remove
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			□Change

Page 2 of 3

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ective date, if other than the effective date is listed, the date must e: If the date inserted in this blument's effective date on the De	be specific and cannot be ck does not meet the ap	prior to date of til pplicable statute	ling or more than 90		
record specifies a delayed he 90th day after the reco		t not an effe	ctive time, at 1	.2:01 a.m. on t	he earlier o
November II	. 2021				
		\sim	Ma a		
	Male Signature of a member or		MU		