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COVER LETTER

Tallahassee, FL 32314

TO: Registration Section Division of Corporations
SUBJECT: HEM HOUSING LLC Name of Limited Liab Nity Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Mallory Williams Name of Person HEM HOUSING LLC Firm/Company
5161 Stewart Drive
Panama City FL 32404 City/State and Zip Code
hemhousina@amail.com E-mail address: (to be used for fluture annual report notification)
For further information concerning this matter, please call:
Mallory Williams at (850) 541-4917 (Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: S25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO REMAY 17 AMILIE ARTICLES OF ORGANIZATION Name of the Limited Liability Company as it now appears on our records. The Articles of Organization for this Limited Liability Company were filed on \angle Florida document number L220000 85504 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

. Florida

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	Address	Type of Action
AMBR	Tyler Tipps	3128 Amanda Lircle	\✓Add
·		Panama City, FL 320	<u>104</u> □Remove
			□Change
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	ullins' address:
_	tle: AMBR
<u> </u>	THAN MULLINS
<u>40</u>	019 Osprey Point
Ka	nama City, FL. 32409-531 US
	Change from
	"32404"
	
	
ctive	date, if other than the date of filing: 5/17/22 (optional)
	we date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed
	's effective date on the Department of State's records.
ord se	becifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
filed.	centes a delayer effective date, but not an effective time, at 12.01 a.m. on the earlier of (o)
	May 17 1000
ed	May 17 2022.
	1,++ //// /// -
	Signature of a member or authorized representative of a member

HEM Housing LL (L22000085504 EIN:88-0643141