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A. BUTLER OCT 13 2022

COVER LETTER

TO:

	legistration Se Division of Cor		
			HOSPITALITY GROUP, LLC .
SUBJECT	r:	Name of Lim	ited Liability Company
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.
Please retu	ırn all correspo	ndence concerning this matter	to the following:
			REBECA REINA
			Name of Person
		HOLLYWOOD RE	ALTY AND HOSPITALITY GROUP, LLC
			Firm/Company
			11430 JUDGE AVE
			Address
			ORLANDO FL 32817
			City/State and Zip Code
			EBEKACUARIO@YAHOO.ES
		E-mail address: (to be used for future annual report notification)
For furthe	r information c	oncerning this matter, please c	all:
	REBEC	A REINA	321 424-8289 at ()
	Name o	f Person	Area Code Daytime Telephone Number
Enclosed i	is a check for tl	ne following amount:	
■ \$25.0°	0 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ Certified Copy (additional copy is enclosed)
	Mailing Addres		Street Address: Registration Section
Ε	Division of C	orporations	Division of Corporations
	P.O. Box 632		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
	l'allahassee.	ri, 33314	2413 IN. IVIOHIOC SHECK SUILC 610

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FILED

HODD: HODD KINE	TY AND HOSPITALITY GRO	OUP. MERCUL 20 A	1 8: 1.0
(Name of the Limited Lia (A Flo	bility Company as it now appears rida Limited Liability Company)	oneogi recorasa)	
The Articles of Organization for this Limited Liability Florida document number	y Company were filed on	05/10/2022 SE	STATE E. Fland assigned
This amendment is submitted to amend the following	;		
A. If amending name, enter the new name of the l	imited liability company her	<u>·e</u> :	
The new name must be distinguishable and contain the words "l	Limited Liability Company," the de	signation "LLC" or the ab	breviation "L.IC."
Enter new principal offices address, if applicable:	<u></u>		
Principal office address MUST BE A STREET AD	<u>DRESS)</u>	<u></u>	
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			
		cords, <u>enter the nam</u>	e of the new regist
		cords, <u>enter the nam</u>	e of the new regist
Name of New Registered Agent:	<u>e</u> :		e of the new regist
ngent and/or the new registered office address her	e: REBECA REINA 11430 JUDGE AV		e of the new regist
	e: REBECA REINA 11430 JUDGE AV	'E	se of the new regist

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
			\ _Add
			□Remove
		-	□Change
			□Add
			□Remove
			□Change
			□Add
			□ Remove
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4111611	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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(If an effec Note: If	e date, if other than the date of filing:
he record ord is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
Dated _	JUNE 16 2022
	Drawer.
	Signature of a member or authorized representative of a member
	FELIX RAMIREZ LABRADA

Filing Fee: \$25.00