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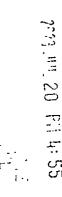
| (Requestor's Name) |
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| (enyretate) 2, pri nene ny |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

| TO: Registration Division of C | | - , | | |
|-----------------------------------|--|--|--------------------------------------|---------------|
| | DG Insurance Group, lle | • | | |
| SUBJECT: | Name of Lin | nited Liability Company | | |
| The enclosed Articles of | of Amendment and fee(s) are sub | omitted for filing. | | |
| Please return all corres | pondence concerning this matter | to the following: | | |
| | Heather Hummel | | | |
| | | Name of Person | | |
| | | Firm/Company | | |
| | 9430 Ivy Brook Run | | | |
| | | Address | | |
| | #408 | C: 10 17 C 1 | | r~} |
| | Fort Myers, FL 33913 | City/State and Zip Code | | , 13 1 may |
| | | to be used for future annual | report notification) | . = |
| For further information | concerning this matter, please c | all: | | Status & |
| Heather Hummel | | 239 89 | 98-6952 | |
| Name | e of Person | Area Code | Daytime Telephone Number | , 5 5 |
| Enclosed is a check for | the following amount: | | | |
| ■ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee Certified Copy (additional copy is en | Certificate of Statu | |
| Mailing Addr | | Street A | | |
| Registration Division of | Corporations | | ration Section on of Corporations | |
| P.O. Box 61 | 327 | The Ce | entre of Tallahassee | |
| Tallahassee | , FL 32314 | 2415 N | I. Monroe Street, Suite 810 | |

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| HDG INSURANCE GROUP, LLC | |
|--|--|
| (<u>Name of the Limited Liability Company as it now</u> (A Florida Limited Liability Com | appears on our records.) npany) |
| The Articles of Organization for this Limited Liability Company were filed Florida document number 4.23000225394 | on 5/8/2023 and assigned |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited liability comp | any here: |
| The new name must be distinguishable and contain the words "Limited Liability Company | y," the designation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | · |
| | |
| Enter new mailing address, if applicable: | に 元 - <u>- の</u> |
| (Mailing address MAY BE A POST OFFICE BOX) | 6 |
| B. If amending the registered agent and/or registered office address on agent and/or the new registered office address here: | our records, <u>enter the name of the new regis</u> |
| Name of New Registered Agent: | |
| New Registered Office Address: | nter Florida street address |
| | , Florida |
| Circ | Zin 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 provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this documbeing 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 aoutour removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | Name | Address | Type of Action |
|--------------|------------------|---------------------------------------|----------------|
| MGR | HEATHER G HUMMEL | 9430 IVY BROOK RUN | ≣ Add |
| | | #408 | □Remove |
| | | FORT MYERS, FL 33913 | □Change |
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| ffective | date, if other than the date of filing: (option ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after fil | al) ing) Pursuant to 605 |
| ote: If | the date inserted in this block does not meet the applicable statutory filing requirements, this d | ate will not be list |
| ocumen | s effective date on the Department of State's records. | |
| | | |
| | pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) | The 90th day afte |
| | • | |
| record: Lis filed | | ~ . •• |
| l is filed | 7/11 20.23 | |
| l is filed | 7/11 .2023. | 25 98 20 |
| l is filed | 7/11 .2023. | (2) (BR 20) P |
| l is filed | 7/11 2023. Signature of a member or authorized representative of a member | 50 Pil le 56 |

Typed or printed name of signee