



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H23000292948 3)))



H230002929483ABC6

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : 120000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
HSH MOUNTAIN VIEW PR 2 LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

RECEIVED

2023 AUG 23 PM 2:34

DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2023 AUG 23 AM 8:30

Electronic Filing Menu

Corporate Filing Menu

Help

T. LEMIEUX

AUG 24 2023

Articles of Amendment to LLC Articles of Organization ofHSH MOUNTAIN VIEW PR 2 LLCThe Articles of Organization for this Limited Liability Company were filed on
8-18-23 and assigned Florida document numberL23000389881

This amendment is submitted to amend the following:

Change name:HSJ MOUNTAIN VIEW PR 2, LLC

These articles of amendment were adopted on

8/23/23

Dated

8/23/23

Signature of a member or authorized representative of a member

CARLOS FIGUEROA

Typed or printed name of signee

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

2023/08/23 AM 8:30