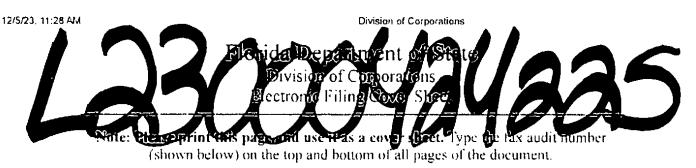
To:



(((H230004151943)))



H230004151943ABC\$

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)389-0502

**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 H-SPRUCE LLC

Certificate of Status	0
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o:

TO:

COVER LETTER

Divi	ision of Cor	porations					
SUBJECT:	H-SPRUC	E LLC					
зовлест.	Name of Limited Liability Company						
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return	all correspo	endence concerning this matter	to the following:				
		Cheyenne Moseley					
			Name of Person				
		Legalzoom.com, Inc.					
	Firm/Company						
	101 N Brand Blvd 11th Fl						
		Address					
٠		Glendale, CA 91203					
		bbfrankjr l @yahoo.com	City/State and Zip Code				
		E-mail address: (to be used for future annual report not	fication)			
For funther in	formation c	oncerning this matter, please ca	al):				
Cheyenne M	oscłcy		800 773-0888				
Name of Person		at ()	x Telephone Number				
Enclosed is a	check for th	ne following amount:					
□ \$25.00 Fi	ling 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 ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our recordiability Company)	d <u>1,</u>)	
The Articles of Organization for this Limited Liability Company Torida document number <u>L23000424225</u> .	and assigned		
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here;		
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LL	C" or the abbreviation "L L.C."	
Enter new principal offices address, if applicable:	2113 5th St. East.Palmetto, FL 34221		
Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:	2113 5th St. East,Palmetto, F.	L 34221	
Mailing address MAY BE A POST OFFICE BOX)			
3. If amending the registered agent and/or registered of		ls, enter the name of the t	
	2:		
Name of New Registered Agent:	<u>e</u> :		
	Enter Florida street addre	53	
Name of New Registered Agent:	Enter Florida street addre , F	lorida	
Name of New Registered Agent: New Registered Office Address:	Enter Florida street uddre		
	Enter Florida street addre , F City see to act in this capacity. I fu performance of my duties, a provided for in Chapter 605,	The Code The Code wither agree to comply with and I am familiar with and F.S. Or, if this document is	
Name of New Registered Agent: New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent and agre rovisions of all statutes relative to the proper and complete ccept the obligations of my position as registered agent as p eing filed to merely reflect a change in the registered office	Enter Florida street addre , F City see to act in this capacity. I fu performance of my duties, a provided for in Chapter 605,	The Code The Co	

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
AMBR	Benjamin B. Frank		□ Add
			□ Remove
		2113 5th St. East, Palmetto, FL 34221	🗎 Change
			Adć
			☐ Remove
			Change
			Add
			🗆 Remove
			Change
			D Add
			П Remove
			Change
			D Add
			☐ Remove
			Change
			□ Remove
			☐ Change

If the record 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 record is filed.

Signature of a member or authorized representative of a member Benjamin Berman Frank

Typed or printed name of signer

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Filing Fee: \$25.00