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COVER LETTER

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TO: Registration Section

Division of Cor	rporations			
5 HAILI	EY, LLC			
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	SEAN HODSON			
		Name of Person	 	
		Firm/Company		
	500 OSCEOLA DRIVE			
		Address		
	DESTIN, FL 32541			
		City/State and Zip Code		
	SEANATUF@GMAIL.CO			
		to be used for future annual report no	tification)	
For further information c	oncerning this matter, please c	all:		
SEAN HODSON		850 832-6399 at ()		
Name o	f Person	Area Code Daytir	ne Telephone Number	
Enclosed is a check for the	he following amount:			
■ \$25.00 Filing 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		Street Address: Registration Se		
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee		
Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

5 HAILEY, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 2/27/2024 and assigned Florida document number <u>L24000101065</u> 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.

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>	Name	Address	Type of Action
MGR	SEAN HODSON	500 OSCEOLA DRIVE	
		DESTIN, FL 32541	■ Remove
		_	□Change
MGR	HODSON HOLDINGS, LLC	500 OSCEOLA DRIVE	■Add
		DESTIN, FL 32541	□Remove
			Change
			⊡Add
			□ Remove
			☐Change
			□Add
			□Remove
			Change
			□ Remove
		_	Change
			□Add
			□Remove
			□Change

). If amei	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effe Note: 1	te date, if other than the date of filing: (optional) (introductive 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 605,0207 (3) of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nt's effective date on the Department of State's records.
the record cord is file	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_	06/26/2024
	Signature of a member or authorized representative of a member
	SEAN HODSON
	Typed or printed name of signee

Filing Fee: \$25.00