L96000000973

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



700157245147

06/26/09--01044--008 **50.00

O9 JUN 26 PM 1:46

J. BRYAN

JUN 2 9 2009

EXAMINER

SHARP KEMM P.A.

4890 W. Kennedy Blvd., Suite 900 Tampa, Florida 33609-1850

Tel: +1-813-286-4199 Fax: +1-813-286-4197 www.sharptaxlaw.com

E-mail: wsharp@sharptaxlaw.com

June 25, 2009

Via Federal Express

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

Re:

Articles of Amendment

Keitum LLC, FL Doc. No: L07000123516

HLP Management L.C., FL Doc. No.: L96000000973

Dear Sir or Madam:

Enclosed please find Articles of Amendment for the above-captioned LLCs. Please be advised that we wish to switch the names of these LLCs so that Keitum LLC becomes HLP Management LLC and HLP Management L.C. becomes Keitum LLC, effective June 26, 2009.

A check for the filing fees payable to Florida Department of State in the amount of \$50.00 is enclosed herewith.

Please contact us should you have any questions. Thank you for your attention to this matter.

114

Yours very truly

William M. Sharp, Sr.

WMS/sp Enclosures

COVER LETTER

Division of Co	rporations -		, ,
SUBJECT:	HLP Ma	nagement L.C.	
		ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sui	bmitted for filing.	٦. ٥.
Please return all corresp	ondence concerning this matter	r to the following:	JUN 2
	Ar	ndrea Darling de Cortes Name of Person	OS JUN 26 PH 1:46 SECRETARY OF STATE TALL AHASSEE. FLORIES
		Sharp Kemm P.A. Firm/Company	STATE STATE
٠	4890 W	est Kennedy Blvd., Suite 9 Address	00
		Tampa, FL 33609 City/State and Zip Code	
	E-mail address: (ortes@sharptaxlaw.com to be used for future annual report noti	fication)
For further information	concerning this matter, please	call:	
Andrea Name	Darling de Cortes of Person	at (<u>813</u>) Area Code & Daytin	286-4199 ne Telephone Number
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 enclose	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regis	LING ADDRESS: tration Section	STREET/COUR Registration Secti	on

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: R

Registration Section

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

ARTICLES OF AMENDMENT TO . ARTICLES OF ORGANIZATION OF

HLP Management L.C.

records.) records.)

(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) Limited Liability Company)				
The Articles of Organization for this Limited Liability C					
Florida document number <u>L9600000973</u>	_ .				
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limi	ted liability company here:				
· k	Keitum LLC				
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Company," the designation "LLC" or the abbreviatio				
Enter new principal offices address, if applicable:	4890 West Kennedy Blvd., Suite 900				
(Principal office address MUST BE A STREET ADDR	YESS) Tampa, FL 33609				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3715 Northside Parkway Buidling 400, Suite 100				
	Atlanta, GA 30327				
B. If amending the registered agent and/or regist registered agent and/or the new registered office addi	ered office address on our records, <u>enter the name of the new</u> ress here:				
Name of New Registered Agent: Sharp	nm P.A.				
New Registered Office Address: 4890	4890 West Kennedy Blvd. Suite 900				
	Enter Florida street address				
	Tampa Florida 33609				
	City Zip Code				
mi in a contrata a la	T AA.				

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

11 / 12

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 anc accept the obligations of my position as registered agent as provided for in Chapter 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member <u>Title</u> <u>Address</u> Type of Action Name St. Niklausenstrasse 92 Klaus J. Hempel <u>MGRM</u> ☐ Add 6047 Kastanienbaum ☑ Remove Switzerland Huerliweidallee 15-17 Juergen Lenz MGRM 6048 Horw Remove Switzerland Huerliweidallee 15-17 MGR Juergen Lenz ✓ Add 6048 Horw ☐ Remove Switzerland ∏ Add Remove $\prod Add$ Remove \square Add Remove

D. If a	mending any other information, enter change(s) here: (Attach additional sheets, if r	necessi	ary.)	
				
		77 S		
Dated		ECHETA LLAHAS	09 JUN 26	
Daicu _	Juegentins	RY OF	6 PH	
	Signature of a member of authorized representative of authorized repres	TATE	94:1	

Page 2 of 2

Juergen Lenz, Manager Typed or printed name of signee

Filing Fee: \$25.00