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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023 : (614)280-3338 Phone

Fax Number : (954)208-0845

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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SIXERS INVESTMENTS, LLC

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Help

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1 Name of limited liability Company as it appears on the records of the Florida Department of		
State: Sixers Investments, LLC		
Enter new principal office 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)		
2. The Florida document number of this fimited liability company is: M11000004756		
3 Jurisdiction of its organization: Delaware		2
4 Date authorized to do business in Florida: 09/21/2011		
SECTION II (5-9 complete only the applicable changes) 5. New name of the limited liability company: HBSE Investments, LLC		JAN -3
5 New name of the limited liability company: \(\frac{11002 investments}{\text{Limited Liability Company.}\)"L.t.	.C.," of "LL	<u>₹</u>
(If name may aifable, enter alternate name adopted for the purpose of transacting business in Flocopy of the written consent of the managers or managing members adopting the alternate name, must contain "Limited Liability Company," "L.L.C." or "LEC.")	rida andintia The alternate	ich ag
6. If amending the registered agent and/or registered officer address on our records, enter the na- registered agent and/or the new registered office address here:	nie of the nev	<u>v.</u>
Name of New Registered Agent:		
New Registered Office Address Enter Florida Street Addre	.7.2	_
, Florida		
Cuy	Zip Code	

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

Thereby 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. Thereby confirm that the limited liability company has been notified in writing of this change.

8. If the amendment changes person, title or capacity in accordance with 605,0902 (1)(e), indicate that change:					
Title! Capacity	<u>Name</u>	Address	Type of Action		
			∏Add		
			Reniove		
			Add		
			Remove		
			AAL SI SAN		
			Remove ω		
			Adebo		
			DbA□		
aforementioned an	the law of which this entity is ore	by the official having custody of reco	Remove ords in the		

Flling Fee: \$25.00

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'SIXERS INVESTMENTS, LLC', FILED A CERTIFICATE OF MERGER, CHANGING ITS NAME TO 'HBSE INVESTMENTS, LLC' ON THE TWENTY-EIGHTH DAY OF DECEMBER, A.D. 2018, AT 2:18 O'CLOCK P.M.



5025487 8320 SR# 20190034459 Authentication: 202010087

Date: 01-03-19