

05-29-14:09:51 AM

Division of Corporations

(845) 818-3588

1/ 5

L05000116794

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

((H14000125615 3)))



H140001256153ABCZ

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 : VCORP SERVICES, LLC
Account Number : I20080000067
Phone : (845) 425-0077
Fax Number : (845) 818-3588

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
HOLLANDALE MOBILE HOME PARK, LLC

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 05 |
| Estimated Charge | \$25.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

<https://efile.sunbiz.org/scripts/efilcovr.exe>

K. SALY
EXAMINER

MAY 30 2014

5/29/2014

RECEIVED
14 MAY 29 AM 9:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
2814 MAY 29 PM 12:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H14000125615 3
**ARTICLES OF AMENDMENT
 TO
 ARTICLES OF ORGANIZATION
 OF**

FILED
 2014 MAY 29 PM 12:11
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Hollandale Mobile Home Park, 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 12/7/2005 and assigned
 Florida document number L05000116794

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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

City, Florida Zip Code

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

Page 1 of 3

H14000125615 3

H14000125615 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|-----------------|-----------------------------|-----------------------------|--|
| AMBR | Bellinson, James L. | 300 E. Maple Road, Ste. 200 | <input type="checkbox"/> Add |
| Managing Member | | Birmingham, MI 48009 | <input checked="" type="checkbox"/> Remove |
| MGR | Riverstone Communities, LLC | 300 E. Maple Road, Ste. 200 | <input checked="" type="checkbox"/> Add |
| | | Birmingham, MI 48009 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |

H14000125615 3

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

See Attachment.

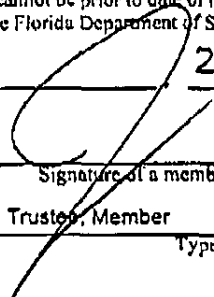
E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated

5/28

2014



Signature of a member or authorized representative of a member

James L. Bollinson, Trustee, Member

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

H14000125615 3

05-29-14:09:51AM;

;845-818-3588

5/ 5

H14000125615 3

**ATTACHMENT
ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
HOLLANDALE MOBILE HOME PARK, LLC**

FILED
2014 MAY 29 PM 12:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Article IV of the Articles of Organization is hereby amended in its entirety to read as follows:

Article IV – Management

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager-managed company.