	UNIFORM BUS		RT (UB	
DOCUI 1. Entity Name	MENT# L0000001	5797	2	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
НЕАТН Р	LORIDA PROPERTIE	S, LLC	.	FILED 5/29
Principal Place	e of Business	Mailing Address		01 MAY 22 AM 9: 20
				SECRETARY UF STATE. TALEAHASSEE FLORIDA
	ace of Business	3. Mailing Address	-	
2300 Suite, Apt. #	<u> </u>	300 N. Hu Suite, Apt. #, etc.	191 Ac	DO NOT WRITE IN THIS SPACE
City & State	Tx	City & State Euless Tx		4. FEI Number Applied For Not Applicable
76039	Country	Zip 74039	Country	5. Certificate of Status Desired
	6. Name and Address of Current			7. Name and Address of New Registered Agent
CT	Corporation S	ystem	Name	
190	o South Pine 19	sland Load	Street	Address (P.O. Box Number is Not Acceptable)
Plantation, FL 33324			City	0000043258805 -05/29/0101130003 *****\$0.(BL *****\$0.00
8. The above r	named entity submits this statement for	the purpose of changing its i	gistered office	or registered agent, or both, in the State of Florida.
OLONATURE				
SIGNATUREs	gnature, typed or printed name of registered agent a	nd title if applicable. (NOTE	Total Control of the	ature required when reinstating) DATE
		FILE NO Make Check Pay	W!!! FEE IS able to Depar	
9.	MANAGING MEMBE	RS/MEMBERS	10.	ADDITIONS/CHANGES
TITLE NAME		☐ Delete	TITLE NAME	Donald Grittin MGRM Change Addition &
STREET ADDRESS			STREET ADDRESS	26128 Fawnwood Court,
CITY-ST-ZIP			CITY-ST-ZIP	Bonita Springs, FL 34134 Diane m. Hendricks and Change Daddition
NAME		Delete	TITLE NAME	Diane m. Hendricks and Change Daddition & Kenneyn A. Hendricks mbRm
STREET ADDRESS DITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	one abc Partway Beloit, wisconsin 53511
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition
NAME STREET ADDRESS			NAME Street Address	200 Randolph Ave, Suite 200
CITY-ST-ZIP			CITY-ST-ZIP	Huntsville AL 35801
IITLE NAME		☐ Delete	TITLE NAME	Tim o'Donnell MERM Change Waddition
TREET ADDRESS			STREET ADDRESS	5913 Sandhills Curole
CITY-ST-ZIP			CITY-ST-ZIP	Plano Tx 75093
ITLE IAM E		☐ Delete	TITLE NAME	Diana Panther Mbem Change Daddition 1502 Struce Court
STREET ADDRESS			STREET ADDRESS CITY-ST-ZIP	Southlate, Tx 76092
TITLE 9			TITLE	Change Addition
IAME		- Dolote	NAME	, silenge () silenge
STREET ADDRESS			STREET ADDRESS CITY-ST-ZIP	
I1. I hereby cer indicated or		nat my signature shall have the	ne exemption state same legal effe	ted in Section 119.07(3)(i), Florida Statutes. I further certify that the information loct as if made under oath; that I am a managing member or manager of the by Chapter 508, Florida Statutes.
SIGNATU	IDE. MANA PART		_	4/23/01 817 485-9075
SIGNATURE: NAME OF SIGNING MANAGING MEMBER, MAN. GER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #				





FILED 01 MAY 22 AM 9: 20

FLORIDA DEPARTMENT OF STATE TARY OF STATE Katherine Harris Secretary of State

May 17, 2001

HEATH FLORIDA PROPERTIES, LLC 2300 NORTH HIGHWAY 121 EULESS, TX 76039

SUBJECT: HEATH FLORIDA PROPERTIES, LLC

Ref. Number: L00000015797

We have received your document for HEATH FLORIDA PROPERTIES, LLC and check(s) totaling \$50.00. However, your check(s) and document are being returned for the following:

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed on the report form.

Please return your document, along with a copy of this letter, within 30 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6051.

Registration/Qualification Section
Division of Corporations Letter Number: 401A00030196