

Jun 08 10 08:59a

Division of Corporations

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L000000016239

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H10000129275 3)))



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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : HADDOCK PROFESSIONAL ASSOCIATION
Account Number : I20010006146
Phone : (407) 571-3900
Fax Number : (407) 571-4390

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

Email Address: lori1@fullsail.com

RECEIVED

10 JUN -8 AM 9:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
TRUE GREEN, LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$30.00

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TALLAHASSEE, FLORIDA

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J. BRYAN

JUN - 9 2010

EXAMINER



June 7, 2010

FLORIDA DEPARTMENT OF STATE
Division of Corporations

HADDOCK PROFESSIONAL ASSOCIATION

SUBJECT: TRUE GREEN, LLC
REF: L00000016239

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TALLAHASSEE, FLORIDA

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of the entity listed on the fax cover sheet and the name of the entity listed in the document must be identical. Please amend the document or the fax cover sheet accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Regulatory Specialist II

FAX Aud. #: H10000129275
Letter Number: 710A00013995

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TRUE GREEN, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lori Ann Linn

Name of Person

Haddock Professional Association

Firm/Company

3300 University Blvd.

Address

Winter Park, Florida 32792

City/State and Zip Code

loril@fullsail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lori Linn

Name of Person

at (407)

571-3908

Area Code & Daytime 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 enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

TRUE GREEN, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 12/28/2000 and assigned
Florida document number L00000016239

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

HM FINANCIAL, LLC

The new name must be distinguishable and end with 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

Florida

City

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 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>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	SunGate Colorado Inc.	2100 W. Littleton Blvd., Suite 300 Littleton, Colorado 80120	<input checked="" 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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated June 3, 2010

Alan Jahde

Signature of a member or authorized representative of a member

Alan R. Jahde, President

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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