# 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

Erom:

Account Name : HADDOCK PROFESSIONAL ASSOCIATION

Account Number : 120010000146 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.\*\*

10ril@fullsail

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

Certificate of Status	1
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EXAMINER



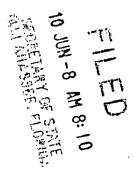
June 7, 2010

### FLORIDA DEPARTMENT OF STATE

HADDOCK PROFESSIONAL ASSOCIATION Division of Corporations

SUBJECT: TRUE GREEN, LLC

REF: L00000016239



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

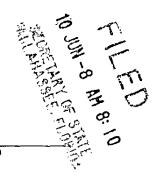
FAX Aud. #: H10000129275 Letter Number: 710A00013995

## **COVER LETTER**

TO: Registration 8 Division of Co			
SUBJECT:	TRUE	GREEN, LLC	
		ted Lisbility Company	
	f Amendment and fee(s) are subcondence concerning this matter	_	BANG A
Trease return an corresp	ondence conserring and matter	to the following.	7 cg
		Lori Ann Linn	- The state of the
		Name of Person	
	Haddod	ck Professional Associ	ation
		firm/Company	
		3300 University Blvd	
		Address	
	Win	ter Park, Florida 3279 City/State and Zip Code	2
		loril@fullsail.com	
	E-mail address: (	to he used for future annual repor	rt noufication)
For further information	concerning this matter, please of	all:	
	Lori Linn	at (_407 )	571-3908 Daysime Telephone Number
Name	of Person	Area Code & L	Daytime Telephone Number
Enclosed is a check for	the following amount:		
S25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is en	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regis	LING ADDRESS: tration Section	Registration	
P.O. I	ion of Corporations 30x 6327 iussee, FL 32314	Division of C Clifton Build 2661 Executi	

Tallahassee, FL 32301

## 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)

The Articles of Organization for this Limited Liability	y Company were filed on	12/28/2000	and assigned
Florida document numberL00000016239			
This amendment is submitted to amend the following	:		
A. If amending name, enter the new name of the l	imited liability company her	<u>re</u> :	
HM	FINANCIAL, LLC		
The new name must be distinguishable and end with the vil.L.C."	words "Limited Liability Compa	my," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:		<u> </u>	
(Principal office address MUST BE A STREET AD	DRESS)		
Enter new mailing address, if applicable:			····
(Mailing address MAY BE A POST OFFICE BOX)	No. 1. 1971 1971 1971 1971 1971 1971 1971		
	-		
B. If amending the registered agent and/or registered agent and/or the new registered office a		our records, <u>enter t</u>	he name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	En	ter Florida street addi	ress
		, 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>	Address	Type of Action
MGR	SunGate Colorado Inc.	2100 W. Littleton Blvd., Suite 300 Littleton, Colorado, 80120	Add Romove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter ch	unge(s) here: (Attach additional sheets, if necessary.)	TO JUN
			JUN-8 AM 8: 10  ECRETARY OF STATE  LAHASSES, FLORIDA
Dated		2010  Abor or althorized representative of a member	
	Ala	an R. Jahde, President ped or printed name of signee	···

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Filing Fee: \$25.00