#L02000019197

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K. SALY EXAMINER DEC 11 2012

COVER LETTER

TO: Registration Section Division of Corpo			
SUBJECT: Miccos	sukee Road, I	LLC	
Sebsec1	Name of Limite	ed Liability Company	
The enclosed Articles of Ar	nendment and fee(s) are subn	nitted for filing.	
Please return all correspond	ence concerning this matter t	o the following:	
	Michael Hetti	inger	
		Name of Person	
		Firm/Company	
	1205 Equest	rian Way	
		Address	
	Tallahassee,	Florida 32312	
		City/State and Zip Code	
	mikeh.abc@como		
	E-mail address: (to	be used for future annual report notif	fication)
For further information con	cerning this matter, please ca	n:	,
Michael Het	tinger	at (850) 251-66	521
Name of P	erson		ne Telephone Number
Enclosed is a check for the	following amount:		
□ \$25.00 Filing Fee	□\$30.00 Filing Fee &	■\$55.00 Filing Fee &	□\$60.00 Filing Fee, Certificate of Status &

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

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

(additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Miccosukee Road, 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 7/29/2002	and assigned
Florida document number L02000019197		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
Red Hills Group, LLC The new name must be distinguishable and end with the w		<u></u>
The new name must be distinguishable and end with the w "L.L.C."	vords "Limited Liability Company," the design	gnation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		enter the name of the new
		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida s	treet address
	, Flo	orida
	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
			Add
			Remove
			<u> </u>
			Add
			Remove
			Add
			Remove
			Add
		Remove	
			Add
		Remove	
			Add
		Remove	

D. If amending any other information, ent	er change(s) here: (Attach additional sheets, if necessary.)
	·
December 11	, <u>2012</u> .
Mill	
7 1	a member or authorized representative of a member
Michael Hettinger	
	Typed or printed name of signee

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Filing Fee: \$25.00