# L03000053526

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J. SAULSBERRY EXAMINER

MAR 2 3 2011

# **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: F.H. Green Properties, L.L.C.  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:	
Trances H. Green Name of Person	
F.H. Green Properties, L.L.C.	
H350 Dixie Hwy. NE	
Palm Bay, FL 32905 City/State and Zip Code	 Pa
in Fo O palm bay maring com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Fron Green or Janet Webb at (321) 723-0851  Name of Person Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee Certificate of Status  Certificate of Status  Certificate of Status  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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Properties LL Company as it now appears on our r	ecords.)
(A Florida Lir	mited Liability Company)	
The Articles of Organization for this Limited Liability Cor	mpany were filed on 12/16/	delta and assigned
Florida document number <u>L030005353</u>	26	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
	##: 12 HE 177 G	(1)
The new name must be distinguishable and end with the words "L.L.C."	s "Limited Liability Company," the de	signation "LLC" or the abbreviation
		7A. 22
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	ESS)	
		S ≥ 2
•		me A
Enter new mailing address, if applicable:		F.S
(Mailing address MAY BE A POST OFFICE BOX)		22 <b>23 25 25</b>
		<b>5 4</b>
B. If amending the registered agent and/or register	red office address on our record	ds. enter the name of the new
registered agent and/or the new registered office addre		,
Name of New Registered Agent:		
New Registered Office Address:	_	
	Enter Florida	a 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 Type of Action <u>Address</u> <u>Title</u> <u>Name</u> Janet E. Webb MCRM Add . ☐ Remove Add □Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00