

L04000092296

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H11000230192 3)))



H110002301923ABCT

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6363

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1012
Fax Number : (850) 878-5368

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 SEP 20 AM 8:38

FILED

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

Email Address: _____

RECEIVED

11 SEP 20 PM 3:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
HAMPTON MANOR OF SUNSHINE, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

C. LEWIS
SEP 21 2011
EXAMINER

FILED

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

2011 SEP 20 AM 8:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Hampton Manor of Sunshine, 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 12/21/2004 and assigned
Florida document number L04000092296.

This amendment is submitted to amend the following:

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

RTGD, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: 12080 SW HWY 484

(Principal office address **MUST BE A STREET ADDRESS**) Dunnellon, FL 34432

Enter new mailing address, if applicable: 12080 SW HWY 484

(Mailing address **MAY BE A POST OFFICE BOX**) Dunnellon, FL 34432

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: CT Corporation System

New Registered Office Address: 1200 South Pine Island Road

Enter Florida street address

Plantation

Florida

33324

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.

Barbara A. Burke

If Changing Registered Agent, Signature of New Registered Agent

Barbara A. Burke
Special Assistant Secretary

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

Title	Name	Address	Type of Action
MGR	Robert Barnum	12080 SW HWY 484 Dunnellon, FL 34132	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Peder Johnsen	PO Box 771019 Ocala, FL 34477	<input type="checkbox"/> Add <input checked="" 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 _____

Signature of a member or authorized representative of a member

Robert Barnum

Typed or printed name of signer

Page 2 of 2

Filing Fee: \$25.00

2011 SEP 20 AM 8:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED