## L06000038390

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B. BOSTICK
DEC - 5 2012
EXAMINER

## **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT:

NHG Holdings, 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:

George R. Grosse

Name of Person

NHG Holdings, LLC

Firm/Company

8691 Commonwealth Avenue

Address

Jacksonville, FL 32220

City/State and Zip Code

grossegeorge@aol.com

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

For further information concerning this matter, please call:

George R. Grosse

Name of Person

, 904, **783-2908** 

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)

7

**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

NHG Holdings, LLC		
( <u>Name of the Limited Liability Com</u> (A Florida Limited	oany as it now appears on our records I Liability Company)	.)
The Articles of Organization for this Limited Liability Compar	ny were filed on April 12, 2006	and assigned
Florida document number L06000038390		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited list	ability company here:	
The new name must be distinguishable and end with the words "Li "L.L.C."	mited Liability Company," the designati	on "LLC" or the abbreviation
Enter new principal offices address, if applicable:		12 C
(Principal office address MUST BE A STREET ADDRESS)		AHH CC TI
Enter new mailing address, if applicable:		FE FE
(Mailing address MAY BE A POST OFFICE BOX)		RA 09
		<u> </u>
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he	office address on our records, <u>en</u> e <u>re</u> :	ter the name of the new
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:		
	Enter Florida street	t address
	, Florid	
	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>	Name	Address	Type of Action
MGR	George R. Grosse	8691 Commonwealth Ave	Add Add
		Jacksonville, FL 32220	Remove
MGRM	Wyllie B. Hodges	8600 Stocks Road	Add
		Jacksonville, FL 32220	Remove
MGRM	Robert F. Newcomer	1455 Cathy Tripp Lane	Add
		Jacksonville, FL 32220	Remove
MGRM	Barry Grosse	1553 Appling Drive	Add
		Mt. Pleasant, SC 29464	Remove
·			Add
		A	Remove
		TAHASSEE, FLORIDA	Remove  PCC -4 PAddi
		ORION AGION	Remove

). If ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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ated	·
	A Company of the Comp
	Signature of a member or authorized representative of a member
	George R. Grosse
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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