L08000042343

(Requestor's Name)				
(Ad	ldress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	 e #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
·	•	,		
(Do	ocument Number)			
	,			
Certified Copies	Certificates	s of Statue		
Certified Copies	_ Certificates	or Status		
Special Instructions to Filing Officer:				
A. LUNT				
JUL 23 2008				
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EXAMINER				
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Office Use Only



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COVER LETTER

Tallahassee, FL 32314

TO: Registration S Division of Co				
SUBJECT: H & M	SmartHomes, LLC			+
	(Name of Lim	iited Liability Company)		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Sean Kelley, Esq.			
		(Name of Person)		
	Kelley & Corneal, P.L.			
		(Firm/Company)		
	904 Anastasia Blvd.			
		(Address)	Z009 SEC	
	St. Augustine, FL 32080		I JUL	-
•		(City/State and Zip Code)	TARY ASSE	
For further information	concerning this matter, please c	all:	يسم أجسر	m
sor further information	concerning this matter, piease c	aii.	P 4: 09	
Sean Kelley		at (904) 819-9706	<u> </u>	
(Name	of Person)	(Area Code & Daytime T	elephone Number)	
Enclosed is a check for t	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 encl	losed)
Regist Divisi	JNG ADDRESS: ration Section on of Corporations dox 6327	STREET/COURIER Registration Section Division of Corporation Clifton Building		

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	H & M SmartHomes, LLC		
(Name of the Limite	d Liability Company as it now a A Florida Limited Liability Comp	ppears on our records.) any)	
The Articles of Organization for this Limited I	iability Company were filed or	1 April 28, 2008	and assigned
Florida document number L08000042343	.		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability compan		
		SE	2005
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability C	Company," the designation LC HASS	or the abbreviation
Enter new principal offices address, if appli	cable:	SEC	2
(Principal office address MUST BE A STRE	ET ADDRESS)	- 1 77	T
		TATE ORIDA	t: 09
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	<u> BOX)</u>		
	·		
B. If amending the registered agent and registered agent and/or the new registered of		on our records, enter the	name of the new
Name of New Registered Agent:	James Hays		
New Registered Office Address:	741 A1A Beach Blvd.		
	(Enter Florida street address)		
	St. Augustine	, Florida <u>32080</u>)
	(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** Title <u>Name</u> **Address** MGR Ty Morgan 721 A1A Beach Blvd. Add Suite 8 Remove St. Augustine, FL 32080 MGR James Hays 741 A1A Beach Blvd. **m**✓ Add St. Augustine, FL 32080 Remove Add Remove □ Add Remove Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated July17 Signature of a member or authorized representative of a member

Typed or printed name of signee Page 2 of 2

Filing Fee: \$25.00