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M. Thomas MAY 2 0 2008

COVER LETTER

Division of Cor				
SUBJECT: GHR C				
	(Name of Lim	ited Liability Company)		
	Amendment and fee(s) are sub ondence concerning this matter	-		
	Kimberly O'Neill			
		(Name of Person)		
	The Hogan Law Firm			
		(Firm/Company)		
	08 MA			
	Brooksville, Florida 3460	(Address)	08 MAY 19 PM 1: 34 SECRETARY OF STATE TALL AHASSEE FLORID	所即
	<u>Diodiorino, Fiorida e Fo</u>	(City/State and Zip Code)	FOR FI	-
For further information c	oncerning this matter, please c	all:	ORIGINAL STATE) •
Deborah Hogan, Esq.		at (352) 799-8423		
(Name o	of Person)	(Area Code & Daytime T	elephone Number)	
Enclosed is a check for the	ne 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)	

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

GHR Christmas House, LLC			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company	were filed on May 14, 2008	and assigned	
Florida document number L08000048355			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	rility company here:		
The new name must be distinguishable and end with the words "Limit".L.C."	ited Liability Company," the designation "L		
Enter new principal offices address, if applicable:	103 SOUTH SAXON AVENUE	SECULIARISES TALLARISES	
(Principal office address MUST BE A STREET ADDRESS)	BROOKSVILLE FL 34601	CARTE 19	
		SSE P	
Enter new mailing address, if applicable:	20 South Broad Street	PH 1:31	
(Mailing address MAY BE A POST OFFICE BOX)	Brooksville, Fl. 34601		
B. If amending the registered agent and/or registered of		he name of the new	
registered agent and/or the new registered office address her	<u>e:</u>		
Name of New Registered Agent:			
New Registered Office Address:			
	(Enter Florida 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM_	George RODRIGUEZ	110 SOUTH BROOKSVILLE AVENUE	■ 7 Add □ Remove
MGRM	George RODRIGUEA	110 SOUTH BROOKSVILLE AVENUE	⋒ Add Remove
			Add Remove
			Add 88
			B HAY 19 PA 1:34
			Add Remove
	ing any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	
	-		
 Dated May 1	5 , 2008		_
	Signature of a member	Local Hogan r or authorized representative of a member	
	Deborah Hogan, Esq.	or printed name of signee	
	Typeu	OF PERMICA MAINE OF SIGNEE	

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Filing Fee: \$25.00