

LD8000060149

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

N. O'Connell JUN 24 2008



**ARONBERG
GOLDGEHN**

Aronberg Goldgehn Davis & Garmisa
330 North Wabash Avenue
Suite 1700
Chicago, Illinois 60611-3586
TEL.: 312-828-9600
FAX: 312-828-9635
www.agdglaw.com

Kai England

DIRECT: 312-755-3138
kengland@agdglaw.com

OUR FILE NUMBER: 85039.00100

June 20, 2008

Via Federal Express: 7919 1929 8365

Florida Department of State
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: HOM MANAGEMENT LLC/ FL DOC NO. L8000060149
FILING OF ARTICLES OF AMENDMENT

Dear Sir or Madam:

The above referenced limited liability company has elected to change its name to HÖM LLC, submitted hereto for filing is the original fully executed Articles of Amendment along with a check in the amount of **\$25.00** as payment for the filing fee.

Should you have any questions or need more information on this matter, please do not hesitate to contact me.

Very truly yours,
ARONBERG GOLDGEHN DAVIS & GARMISA


Kai England
Corporate Paralegal

Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HOM Management 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:

Kai England
(Name of Person)

Aronberg Goldgehn Davis & Garmisa
(Firm/Company)

330 N. Wabash, Suite 1700
(Address)

Chicago, IL 60611
(City/State and Zip Code)

For further information concerning this matter, please call:

Kai England at (312) 755-3138
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

FILED
08 JUN 23 AM 11:46
SECRETARY OF STATE
TALLAHASSEE FLORIDA

HOM MANAGEMENT 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 JUNE 18, 2008 and assigned
Florida document number L08000060149.

This amendment is submitted to amend the following:

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

HOM 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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

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)

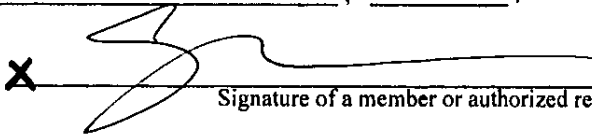
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated June 19, 2008

X 

Signature of a member or authorized representative of a member

Jeffrey Eiserman, Manager
Typed or printed name of signee

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 TALLAHASSEE, FLORIDA