

LO9000012618

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 MAY -6 PM 3:16

B. T. Lock MAY 06 2009



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 15, 2009

ALOMA AVENUE, LLC
2235 MERCATOR DRIVE
ORLANDO, FL 32807 US

SUBJECT: ALOMA AVENUE, LLC
Ref. Number: L09000012618

This is to advise you that on February 6, 2009, we filed your limited liability company under the above name, which was not available.

Therefore, we request that you file an amendment, at no charge, to change the name of your limited liability company to make it distinguishable from the existing entity. We have enclosed forms and guidelines for your assistance.

We apologize for this inconvenience and trust that you understand the urgency in completing this amendment, and returning it along with a copy of this letter to my attention as soon as possible.

If you have any questions, please call (850) 245-6911.

Sincerely,

Brenda Tadlock
Senior Section Administrator
Registration/Qualification Section

Letter Number: 609A00012612

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Aloma Avenue, 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 February 6, 2009 and assigned
Florida document number L09000012618.

This amendment is submitted to amend the following:

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

HHMH2, 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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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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:

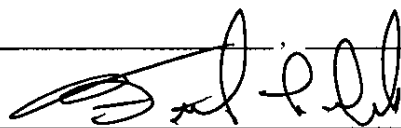
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ 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

Timothy L. Durocher

Typed or printed name of signee