

L11000016830

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

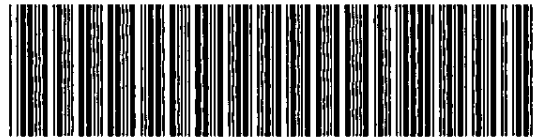
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2013 AUG 20 AM 8:15
THE SECRETARY OF STATE
FACILITY 110011A

FILING

J. SAULSBERRY
EXAMINER
AUG 22 2013

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Progenitor Properties, 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:

Leonard L Williams III

Name of Person

Progenitor Properties, LLC.

Firm/Company

2307 Gates Drive

Address

Tallahassee, Florida 32312

City/State and Zip Code

Leonard76@comcast.net

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

For further information concerning this matter, please call:

Leonard L. Williams III

Name of Person

904 859-3551

at ()

Area Code & Daytime Telephone Number

2013 AUG 20 AM 8:15
STATE
TALLAHASSEE, FL 32301
51141

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)

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**

Progenitor Properties, 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 02/09/2011

Florida document number L11000016830

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STATE OF FLORIDA
TALLAHASSEE

This amendment is submitted to amend the following:

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

M & H Tallahassee, 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:

2910 Kerry Forest Pkwy, D-4 #279

(Principal office address MUST BE A STREET ADDRESS)

Tallahassee, FI 32309

Enter new mailing address, if applicable:

2910 Kerry Forest Pkwy, D-4 #279

(Mailing address MAY BE A POST OFFICE BOX)

Tallahassee, FI 32309

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:

Leonard L Williams III

New Registered Office Address:

2307 Gates Drive

Enter Florida street address

Tallahassee

Florida 32312

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.

Leonard L Williams III
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:

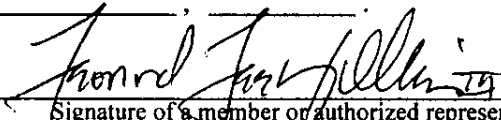
MGR = Manager
MGRM = Managing Member

<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
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_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 2013 AUG 20 AM 8:15
 TALLAHASSEE, FLORIDA

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

LEONARD LEE WILLIAMS

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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REGISTRATION STATE
CALIFORNIA

FILED