

**L110000031500**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

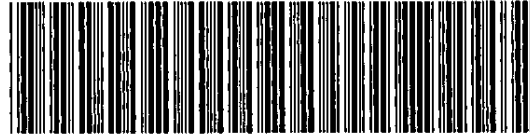
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

**JUL 03 2012**

**L. SELLERS**

Office Use Only



**700236923317**

06/29/12--01026--023 \*\*25.00

**FILED**  
**12 JUN 29 PM 3:59**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**



June 25, 2012

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

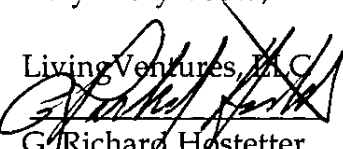
Re: Waiver of use of Name

To Whom It May Concern:

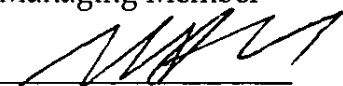
The Undersigned, constituting a majority of the Managing Members of LivingVentures, LLC, and acting on its behalf, herewith authorize the use of the name LivingVentures Development by LivingVentures Development, LLC, a name change filing to which this waiver is attached and waive any conflict arising therefrom.

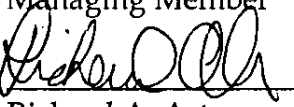
Thank you for your attention to this matter.

Very Truly Yours,

  
LivingVentures, LLC

G. Richard Hostetter  
Managing Member

  
George D. Livingston  
Managing Member

  
Richard A. Asta  
Managing Member

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: Green Florida Investments, 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:

G. Richard Hostetter

Name of Person

CommerCenters, LLC

Firm/Company

2200 Lucien Way Ste 350

Address

Maitland, FL 32751

City/State and Zip Code

rhostetter@ggi-x.com

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

For further information concerning this matter, please call:

G. Richard Hostetter

Name of Person

at ( 407 )

875-9989

Area Code & Daytime Telephone Number

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12 JUN 29 PM 3:59

FILED

**Green Florida Investments, LLC**

Page 1 of 2

FILED  
12 JUN 29 PM 3:49  
ZC Code  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
address

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 25, 2012,

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

G. Richard Hostetter  
\_\_\_\_\_  
Typed or printed name of signee