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(Re	equestor's Name)	
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T. CLINE
OCT -4 2011
EXAMINER

COVER LETTER

	istration Scision of Co				
SUBJECT:	My	Starter Home Hard-	-Money Investors F	und 1, LLC	
		Amendment and fee(s) are sub ondence concerning this matter	-		
			Name of Person		
		N	My Starter Home, Inc.		
			Firm/Company		
		7777 Dav	ie Road Extension Sui	ite 302B	
			Address	 	comb made
		Ho	llywood, Florida 33020	0	ANII OCT SEGRETA
City/State and Zip Code		HE CI			
KHepburn@mystarterhome.net E-mail address: (to be used for future annual report notification)			ASSE - S		
For further in	nformation o	concerning this matter, please c			T-3 MIN 12 HASSEE FLORIDI
		ahm Hepburn	at (_305)	303-0149	
	Name o	of Person	Area Code & I	Daytime Telephone Number	T
Enclosed is a	check for t	he following amount:			
∠ \$25.00 Fi	ling Fec	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is en	closed) Certified	te of Status &
	MAIL	ING ADDRESS:	STREET/C	OURIER ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Comp (A Florida Limited	ONEY INVESTORS F pany as it now appears	on our records.)	
The Articles of Organization for this Limited Liability Compar Florida document numberL11000083135			_ and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company here	:	
MSH Apartmer	nt Fund 1, LLC		
The new name must be distinguishable and end with the words "Lin"L.L.C."	nited Liability Compan	y," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		2	SEC SEC
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered of registered agent and/or the new registered office address he			PETARY OF STATE OR DA name of the new
registered agent and/or the new registered office address no	<u>:re</u> ;		
Name of New Registered Agent:			
New Registered Office Address:			
	Ente	Enter Florida street address	
		, Florida	
	City		Zin 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

<u>'itle</u>	<u>Name</u>	Address	Type of Ac	<u>tion</u>
	417491		Add Remove	
			Add Remove	
	·		Add Remove	
			Add Remove	
			Add Remove	
		AE CAHAS	A Reprove	TO CAP
. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary r	<i>హై</i> ఉ.	
		βA		
_			_	
Dated	September 30 20	<u> </u>	_	
		m or authorized representative of a member M. C. M. J. M. J.		

Page 2 of 2

Filing Fee: \$25.00