

#L12000047517

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

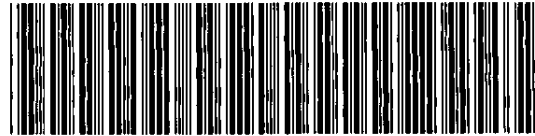
(Business Entity Name)

(Document Number)

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RECEIVED
12 MAY -8 AM 10:49
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
12 MAY -8 AM 10:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER
MAY 9 2012



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195
REFERENCE : 195250 4218B
AUTHORIZATION : *Spudelman*
COST LIMIT : \$ 60.00

ORDER DATE : May 8, 2012

ORDER TIME : 9:58 AM

ORDER NO. : 195250-005

CUSTOMER NO: 4218B

DOMESTIC AMENDMENT FILING

NAME: HUNTINGTON GREEN OF MELBOURNE,
LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Stephanie Milnes -- EXT# 2920

EXAMINER'S INITIALS: _____

RECEIVED
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DIVISION OF CORPORATE FILINGS
TALLAHASSEE, FL 32310

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: HUNTINGTON GREEN OF MELBOURNE, 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:

JEFFERY W. WELLS

Name of Person

HUNTINGTON GREEN OF MELBOURNE, LLC

Firm/Company

211 CAROLINE STREET - OFFICE

Address

CAPE CANAVERAL, FL. 32920

City/State and Zip Code

WELLSBOYS@CFL.RR.COM

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

For further information concerning this matter, please call:

JEFFERY W. WELLS

Name of Person

at (**517**)

256-7111

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input 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 checked="" 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

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Page 1 of 2

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>
MGRM	HGA MANAGEMENT INC	211 Caroline Street - Office Cape Canaveral, FL 32920	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	JEFFERY W. WELLS	211 Caroline Street - Office Cape Canaveral, FL 32920	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	TEE WELLS	211 Caroline Street - Office Cape Canaveral, FL 32920	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	JEFFERY W. WELLS	211 Caroline Street - Office Cape Canaveral, FL 32920	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	TEERAPORN WELLS	211 Caroline Street - Office Cape Canaveral, FL 32920	<input checked="" 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 MAY 7, 2012


Signature of a member or authorized representative of a member

JEFFERY W. WELLS, MEMBER

Typed or printed name of signee