13000046917

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DEC 1 9 2013 T. HAMPTON

COVER LETTER

TO: Registration Section Division of Corporations

H3LP FLORIDA 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:

Kim Garner

Name of Person

H3LP FLORIDA LLC

Firm/Company.

1700 SUMMIT LAKE DR.

Address

TALLAHASSEE, FL 32317

City/State and Zip Code

kim.garner@mainline.com

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

For further information concerning this matter, please call:

Kim Garner

850 219-5221

Name of Person

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H3LP FLORIDA LLC			
(<u>Name of the Limited Lia</u> (A Flo	ability Company as it now appears on our records. orida Limited Liability Company)		
The Articles of Organization for this Limited Liab	ility Company were filed on March 29, 2013	and assigned	
Florida document number L13000046917			
This amendment is submitted to amend the following. A. If amending name, enter the new name of the		FILET 2013 DEC 18 PH SECRETARY OF TALLAHASSEE.	
The new name must be distinguishable and end with the "L.L.C."	ne words "Limited Liability Company," the designation		
Enter new principal offices address, if applicable	le:	n-	
(Principal office address MUST BE A STREET A	ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, ente	ter the name of the new	
Name of New Registered Agent:		· · · · · ·	
New Registered Office Address:			
	Enter Florida street a		
_	, 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

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>	Address	Type of Action
MGR	Summit Holdings V, LLC	2073 Summit Lake Dr.	Add
		Suite 155	Remove
		Tallahassee, FL 32317	
MGR	The Beatitude Foundation Inc.	1700 Summit Lake Dr.	✓Add
		Tallahassee, FL 32309	Remove
			Add
		TALLAHA	Remove
		اران الد: ورفي	
			Remove
	·		Add
			Remove
			Remove

If amending any other information,	enter change(s) here: (Attach additional sheets, if necessary.)
	·
December 13	2013
nieu	
Janes C	Mommo
/ 1	e of a member of authorized representative of a member
Sherry C. Thomps	ón, VP
	Typed or printed name of signee

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Filing Fee: \$25.00

2013 DEC 18 PM 1: 54
SECKETARY OF STATE