

Sep. 29, 2014 11:51 AM
9/15/2014

L14000008924

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H14000216001 3)))



H140002160013ABCP

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : GRAYROBINSON, P.A. - ORLANDO
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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DIVISION OF CORPORATIONS
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MHRS HOLDINGS, LLC

Certificate of Status	0
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Corporate Filing Menu

Help

Sep. 29. 2014 11:52AM

No. 0363 P. 5

950-617-6381

9/23/2014 8:55:07 AM PAGE 1/001 Fax Server



September 23, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

GRAYROBINSON

SUBJECT: MHRS HOLDINGS, LLC
REF: L14000008924

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neyssa Culligan
Regulatory Specialist II

FAX Aud. #: H14000216001
Letter Number: 714A00020318

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14 SEP 29 AM 11:09
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BUREAU OF COMMERCIAL
INFORMATION SERVICES

Sep. 29, 2014 11:51AM

No. 0363 P. 2

((H14000216001 3)))

TO
ARTICLES OF ORGANIZATION
OF

FILED
2014 SEP 29 AM 9:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MHRS Holdings, 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 January 16, 2014 and assigned
Florida document number L14000008924

This amendment is submitted to amend the following:

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

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 office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Melinda K. Sebasovich

New Registered Office Address:

3948 3rd Street South #169

Enter Florida street address

Jacksonville Beach

Florida 32250

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 605, 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.

Melinda K. Sebasovich
If Changing Registered Agent, Signature of New Registered Agent

((H14000216001 3)))

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

((H14000215001 3)))

MGR = Manager

AMBR = Authorized 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
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Sep. 29. 2014 11:51AM

No. 0363 P. 4

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) (((H)4000216001 3)))

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 9/28 2014



Signature of a member or authorized representative of a member

Melinda Sebasovich

Typed or printed name of signer

Page 3 of 3

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2014 SEP 29 AM 9:16
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TALLAHASSEE, FLORIDA

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