

L 14 0000 50528

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

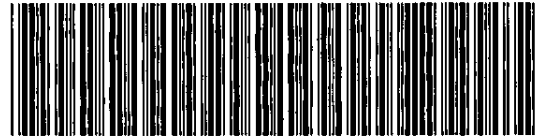
(Business Entity Name)

(Document Number)

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JUL 02 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **HS PORT RICHEY 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:

Emil G. Pratesi, Esquire

Name of Person

Richards, Gilkey, Fite, et al.

Firm/Company

1253 Park Street

Address

Clearwater, Florida 33756

City/State and Zip Code

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

For further information concerning this matter, please call:

Emil G. Pratesi

Name of Person

at **(727) 443-3281**

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**

HS Port Richey 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 March 27, 2014 and assigned
Florida document number L14000050528.

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 offices 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:

New Registered Office Address:

Enter Florida street address

City, Florida

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.

If Changing Registered Agent, Signature of New Registered Agent

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:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Steven R. Rodriguez	14706 Tudor Chase Drive, Tampa FL 33626	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
MGR	Richard Lafrance	P.O. Box 248, Westport MA 02790	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
MGR	Kevin R. Bowden	18604 Avenue Monoco, Lutz, FL 33558	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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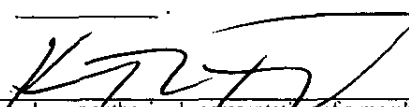
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

See attachment.

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 June 17, 2014



Signature of a member or authorized representative of a member

Kevin R. Bowden, Manager

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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Company Purpose. The Company is formed solely for the purpose of acquiring, owning, improving, holding, selling, leasing, transferring, exchanging, operating and maintaining the hospitality property now doing business as a Homewood Suites located at 11115 US. Route 19 North, Port Richey, Florida (the "Premises"); (ii) obtaining a loan from Menna Pasco, LLC, a Florida limited liability company, which loan shall be secured by a second priority mortgage upon the Premises (the "Second Mortgage") and (iii) transacting any and all lawful business that is incident, necessary and appropriate to the foregoing. Provided further, notwithstanding anything to the contrary in this Operating Agreement or in the Articles of Organization or under applicable law, so long as the Second Mortgage on the Premises is outstanding, the Company shall not, without the prior written consent of the holder of the Second Mortgage, do any of the following:

- a. engage in any business activity other than those set forth above;
- b. incur any indebtedness for borrowed money or assume or guaranty any indebtedness for borrowed money;
- c. dissolve or liquidate, in whole or part;
- d. consolidate or merge with or into any other entity or convey or transfer its properties or assets substantially as an entirety to any entity;
- e. amend or cause to be amended the organizational documents of the Company with respect to this Section 3.1;
- f. take any action that causes the Company to become insolvent; or
- g. issue additional membership interests in the Company unless such interests are pledged to secure the Company's obligations to Menna Pasco, LLC.