

L150000 84701

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

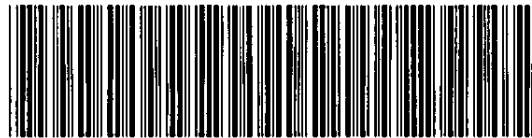
(Business Entity Name)

(Document Number)

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FILED  
2015 OCT - 7 AM 9:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
2015 OCT - 7 AM 10:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

OCT 08 2015  
J. HARRIS

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 822530 7450459

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : October 6, 2015

ORDER TIME : 5:09 PM

ORDER NO. : 822530-005

CUSTOMER NO: 7450459

DOMESTIC AMENDMENT FILING

NAME: MHPI V, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT  
       RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER'S INITIALS: \_\_\_\_\_

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MHPI V, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

NORA H. MILLER, ESQ.

Name of Person

RAILEY HARDING & ALLEN, P.A.

Firm/Company

15 N EOLA DRIVE

Address

ORLANDO, FL 32801

City/State and Zip Code

NMILLER@RAILEYHARDING.COM

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

For further information concerning this matter, please call:

NORA MILLER

Name of Person

at 407

Area Code

648-9119

Daytime Telephone Number

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

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

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$30 Filing Fee &  
Certificate of Status

☐ \$55 Filing Fee &  
Certified Copy

☐ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy

**STATEMENT OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

**FIRST:** The name of the limited liability company is: MHPI V, LLC

**SECOND:** The Florida Document number of the limited liability company is: L15000084701

**THIRD:** Document to be corrected is: ARTICLES OF ORGANIZATION

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)**

☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

THE MANAGER WAS INCORRECTLY IDENTIFIED AS MHP PORTFOLIO, LLC

THE MANAGER IS ACTUALLY MHP MANAGEMENT, LLC

**OR**

☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

**OR**

☒ The electronic transmission of the record was defective.

[Signature]  
Signature of Authorized Representative

10/5/15  
Date

FILED  
2015 OCT -7 AM 9:25  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Signature of new registered agent, if applicable :( NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

**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.*

\_\_\_\_\_  
Registered Agent's Signature

**Filing Fee: \$25.00**  
**Certified Copy: \$30.00 (optional)**