

**MO7-1000002636**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000201575 3)))



H140002015753ABCZ

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.** Doing so will generate another cover sheet.

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

From: Account Name : VCORP SERVICES, LLC  
Account Number : 120080000067  
Phone : (845) 425-0077  
Fax Number : (845) 819-3588

2014 AUG 27 PM 8:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***  
Email Address: \_\_\_\_\_

RECEIVED

14 AUG 27 AM 6:40

DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
INFORMATION SERVICES

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
HOBE SOUND MOBILE HOME PARK, L.L.C.

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 02      |
| Estimated Charge      | \$25.00 |

AUG 28 2014  
T CLINE

Electronic Filing Menu Corporate Filing Menu

Help

**MO7-2636**

H14000201575 3

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE  
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT  
BUSINESS IN FLORIDA**

**SECTION I (1-3 must be completed)**

1. Name of limited liability Company as it appears on the records of the Florida Department of State: Hobe Sound Mobile Home Park, L.L.C.
2. Jurisdiction of its organization: Michigan
3. Date authorized to do business in Florida: May 7, 2007

**SECTION II (4-7 complete only the applicable changes)**

4. New name of the limited liability company: \_\_\_\_\_  
(must contain "Limited Liability Company," "L.L.C.," "LLC," or "LIMITED LIABILITY COMPANY.")

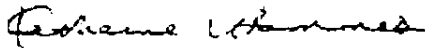
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C.," "LLC," or "LIMITED LIABILITY COMPANY.")

5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: \_\_\_\_\_

6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change: Change name of Manager and mailing address to:

Riverstone Communities, LLC, 300 E. Maple Rd., Suite 300, Birmingham, MI 48009

7. Attached is an original certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.



Signature of the authorized representative

Katherine L. Hammers, Authorized Person

Typed or printed name of signer

**Filing Fee: \$25.00**

H14000201575 3

2014 AUG 27 AM 9 15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED