L040000 33110

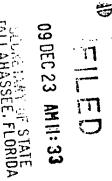
(Re	equestor's Name)				
(, , , ,				
(Address)					
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(Address)					
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	isiness Entity Nan	ne)			
(Do	ocument Number)	,			
Certified Copies	fied Copies Certificates of Status				
		;			
Special Instructions to Filing Officer:					





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12/23/09--01026--003 **25.00



COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT:	COMFORT HOMES OF FLORIDA LLC					
Sobret.						
The enclosed Articles of Ar	mendment and fee(s) are sub	emitted for filing.				
Please return all correspond	lence concerning this matter	to the following:				
	ALLU					
	3665 BONITA BEACH ROAD, STE. 1-3					
	Address					
	BONITA SPRINGS, FL 34134					
		City/State and Zip Code				
	HBUSBY@ALLUREACCOUNTING.COM E-mail address: (to be used for future annual report notification)					
For further information con	cerning this matter, please c	all:				
MAREN	A LOEFFLER	at (239)	992-3355			
Name of P	erson		time 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)			
Registrati Division P.O. Box	G ADDRESS: ion Section of Corporations 6327 see, FL 32314	STREET/COU Registration Sec Division of Corp Clifton Building 2661 Executive	porations 5			

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



		S OF FLORID		·
(Name of the Linn	(A Florida Limited	any as It now appea Liability Company)	IS on our records.)	
The Articles of Organization for this Limited	Liability Compar	ny were filed on	04/30/2004	and assigned
Florida document numberL040000	33110			
This amendment is submitted to amend the fo	ollowing:			
A. If amending name, enter the new name	of the limited lia	bility company her	œ:	
	N/	Α		
The new name must be distinguishable and end "L.L.C."	with the words "Lin	nited Liability Compa	nny," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:		N/A		······································
(Principal office address MUST BE A STRE	(ET ADDRESS)			
Enter new mailing address, if applicable:		N/A		
(Mailing address MAY BE A POST OFFIC	E <i>BOX</i>)			
B. If amending the registered agent and	i/or registered o	ffice address on o	ur records, enter th	ie name of the new
registered agent and/or the new registered				<u> </u>
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A			
		Ent	er Florida street addr	ess .
			, Florida	
		City		7in 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

H amending the Managers or Managing Members on our records, enter the fitte, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Title** Name **Address** Type of Action **MGRM** WEISS, UWE 3665 BONITA BEACH RD., STE. 3 DbA [7] BONITA SPRINGS, FL 34134 Remove MGRM WEISS, MARCELLA 3665 BONITA BEACH RD., STE. 3 ✓ Add Remove **RONITA SPRINGS FL 34134 MGRM** GOLF TO GULF HOMES 3665 BONITA BEACH RD., STE. 3 ☐ Add **BONITA SPRINGS FL 34134** ✓ Remove WEISS, UWE MGR P.O. BOX 60435 Add FORT MYERS EL 33906 Remove MGR WEISS, MICHAEL 15900 OLD WEDGEWOOD COURT FORT MYERS, FL 33908 Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 8 2009 APRIL 1 Dated Signature of a member of authorized representative of a member **UWE WEISS** Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00