

LAUT00058561

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

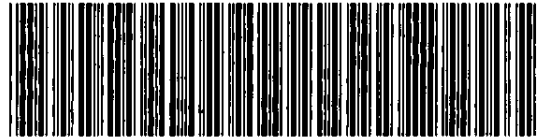
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EXAMINER

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TALLAHASSEE FLORIDA

GODBOLD, DOWNING & BILL

A PROFESSIONAL ASSOCIATION

ATTORNEYS AT LAW

GENE H. GODBOLD
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SUITE 101
WINTER PARK, FLORIDA 32789

TELEPHONE (407) 647-4418
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lawoffice@gdb-law.com

October 23, 2009

VIA U.S. MAIL

Amendments Section
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Re: A&M Homes, LLC
Document Number: L09000058561

Dear Sir or Madam:

In regard to the above referenced entity, please find original executed Articles of Amendment, together with our check in the amount of \$55.00 representing the filing fee of the Amendment and certified copy. Once filed, please return the certified copy in the enclosed self-addressed envelope.

I appreciate your assistance and should you have any questions, please do not hesitate to contact me at the telephone number listed in the above letterhead.

Sincerely,

A handwritten signature in black ink, appearing to read 'Kristy Horan', with a long horizontal line extending to the right.

Kristy Horan,
Assistant to Grant T. Downing

/klh
encl.

cc: Ashley Burleson (via email w/out encl.)
Mike Levak (via email w/out encl.)

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: A&M Homes, 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:

Grant T. Downing

Name of Person

Godbold, Downing & Bill, P.A.

Firm/Company

222 W. Comstock Ave., Suite 101

Address

Winter Park, FL 32789

City/State and Zip Code

gdowning@gdb-law.com

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

For further information concerning this matter, please call:

Grant T. Downing

Name of Person

at (407)

647-4418

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

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TALLAHASSEE FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

A&M Homes, 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 June 16, 2009 and assigned
Florida document number L09000058561.

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)

316 W. 11th Street

Chuluota, FL 32766

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

316 W. 11th Street

Chuluota, FL 32766

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

, Florida

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 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

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SECRETARY OF STATE
FLORIDA

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

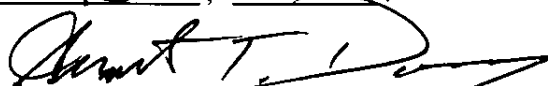
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Mike Levak	2000 W. S.R. 434	<input type="checkbox"/> Add
		Oviedo, FL 32765	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

Dated October 23, 2009



Signature of a member or authorized representative of a member

GRANT T. DOWNING

Typed or printed name of signee

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TALLAHASSEE, FLORIDA