K14000018378

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S. CHATHAM OCT 10 2022

OF STANDARD OF STA

COVER LETTER

TO:

	ream Homes Realty LLC	; ,	,
SUBJECT:	Name of Lim	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	amitted for filing	
Plorida Dream Homes Realty LLC			
	Andrea Hoff-Domin		
		Name of Person	
	Florida Dream Homes Rea	ulty, LLC	
		Firm/Company	
	500 E Broward Blvd, Suite	e 1710	p Code annual report notification) Daytime Telephone Number Daytime Telephone Number S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) reet Address: egistration Section
		Address	
	Fort Lauderdale, FL 33394	4	
	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
			ification)
For further information	concerning this matter, please c	all:	
		at ()	
Name	of Person		ne Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
			ection
_		-	
P.O. Box 63	27	The Centre of	Γallahassee
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Florida Dream Homes Realty LLC		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records. Liability Company))
The Articles of Organization for this Limited Liability Company Florida document number L14000018378	y were filed on 24.6.2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LI.C"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		JUL
(Principal office address MUST BE A STREET ADDRESS)		957
		<u> </u>
		ယ္ ညိုင္ ယ္ ညိုင္
Enter new mailing address, if applicable:		86 65
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter th</u>	ne name of the new register
New Registered Office Address:		
	Enter Florida street address	
	, Flor	ida
	•	гір Соде
New Registered Agent's Signature, if changing Registered Agent		
I hereby accept the appointment as registered agent and agi provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as	e performance of my duties, and	I am familiar with and

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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Domin, Heinrich	500 E Broward Blvd, Suite 1710	□Add
		Fort Lauderdale, FL 33394	\ \exists Remove
			□Change
			DIVINADO DE COMO DE CO
			Remove
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		<u>.</u>	
	date of filing: 24.6.2022 be specific and cannot be prior to date of files bek does not meet the applicable statute) Pursuant to 605.020
cument's effective date on the De		ry thing requirements, this date	with not be fisted a
cord specifies a delayed effective s filed.	e date, but not an effective time, at 12:0	of a.m. on the earlier of: (b) The	ie 90th day after th
ed	2022		
/	Signature of amember or authorized repres	/	
/()	1. 17011-100mi	-(

Filing Fee: \$25.00