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D. SCOTT MAY 1 - 2017

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	Orlandi Howe Name of Lim	S LLC lited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	pondence concerning this matter	to the following:	
	Jos	Name of Person	
		\times	
		Firm/Company	
	134 Sevieca	Point Trail, Address	
	<u> </u>	NWW F1 3474 City/State and Zip Code	<u>Ce</u>
1 ,	E-mail address: (di 2010 a outlock to be used for future annual report noti	· Com fication)
For further information	concerning this matter, please ca	all:	
Jose Orl	CANCAI of Person	at (484) (0844 Area Code Daytim	635 e Telephone Number
Enclosed is a check for	the following amount:		ESSE SE
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Orlandi Hon	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L17000079097</u> .	were filed on April, 10, 2017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
Orlandi Homes, LLC	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	134 Severa Point Trail
(Principal office address MUST BE A STREET ADDRESS)	Kissimuree, Fl. 34746
Enter new mailing address, if applicable:	134 Seveca Point Trail
(Mailing address MAY BE A POST OFFICE BOX)	Kissimmee, Fl. 34746
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address:	ffice address on our records, enter the name of the new
New Registered Office Address.	Enter Florida street address
 	, Florida co
	City Zip Code 2
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.

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>	Address	Type of Action
CEO,	Jose Orlandi	13H Sevura Point Trail.	🗹 Add
MGR		Kissimmel F1 34746	Remove
			□ Change
<u>vp</u>	Lynzie Orlandi	134 Serveca Point Trail	52 Add
		Kissimmee F1 34746	Remove
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