117000204571

Office Use Only



500318255865

09/14/18--01025--010 **25.00

9/19/18/25

COVER LETTER . . .

SOUTH CO	AST HOMES, LLC		
·			
	Name of Lim	ited Liability Company	
sed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
irn all correspor	idence concerning this matter	to the following:	
	LORI CARPENTER LAN	DRUM	
		Name of Person	
	THE PRIVATE CLIENT I	LAW GROUP	
	-	Firm/Company	· · · · · · · · · · · · · · · · · · ·
	75 14TH STREET NE. SU	HTE 2200	
		Address	1
	ATLANTA, GEORGIA 30)309	
	*	City/State and Zip Code	
	Handrum@toelg.com E-mail address: 0	to be used for future annual report notific	cation)
r information co			
	NDRUM	404 389-9039	
Name of	Person	Area Code Daytime	Telephone Number
s a check for the	e following amount:		
) 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)
	r information co RPENTER LAN Name of	LORI CARPENTER LAN THE PRIVATE CLIENT I 75 14TH STREET NE. SU ATLANTA, GEORGIA 30 Handrum@toele.com E-mail address: (r information concerning this matter, please concerning this matter, please concerning this matter.) RPENTER LANDRUM Name of Person s a check for the following amount: Filing Fee	THE PRIVATE CLIENT LAW GROUP Firm/Company 75 14TH STREET NE. SUITE 2200 Address ATLANTA, GEORGIA 30309 City/State and Zip Code Itandrum/&treelg.com Lemail address: (to be used for future annual report notification concerning this matter, please call: RPENTER LANDRUM 404 389-9039 at (

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

SOUTH COAST HOMES, LLC		
(<u>Name of the Limited Liabi</u> (A Floric	lity Company as it now appears on our records.) da Limited Liability Company)	
The Articles of Organization for this Limited Liability of Florida document number <u>L17000204571</u>	Company were filed on October 3, 2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
TRUST HOMES-SOUTH COAST, LLC		
The new name must be distinguishable and contain the words "Lin	mited Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		·
(Principal office address MUST BE A STREET ADD		
Trincipal office address of CST DE ASTREET ADD	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regi		iter the name of the ni
registered agent and/or the new registered office ad-	dress here:	
Name of New Registered Agent:		
New Registered Office Address:		
tvest (vegimered variet andress).	Enter Florida street address	
	Florid	a
- +	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 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
AMGR	PATRICK MURPHY		
		5959 LAGOON DRIVE MIAMI, FLORIDA 33126	■ Remove
		75 14th STREET NE, SUITE 2200	☐ Change
MGR	STEVEN K. TAYLOR	ATLANTA, GEORGIA	Add
			□ Remove
			□ Change
			Remove
			Change
			Remove
			☐ Change
			□ Remove
			☐ Change
			D Add
			Remove
			□ Change

		-		_
			 	
				
	····			
				_
		,		
				
	-			
ective date, if other than the date in effective date is listed, the date must be the lift be date inserted in this blockniment's effective date on the Department's	c does not meet the applicat	date of filing or more than the statutory filing requir	(optional) 90 days after filing.) Pursuant to ements, this date will not be	605,020 listed a:
record specifies a delayed e The 90th day after the recor	effective date, but not d is filed.	an effective time, a	it 12:01 a.m. on the ea	arlier o
ted SEPTEMBER 13	2018	<u>.</u> .		

Page 3 of 3

Typed or printed name of signce

Filing Fee: \$25.00