

H1900030214
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H19000116879 3))



H190001168793ABC9

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : ACCOUNT BOOKKEEPING CORP
Account Number : 120120000055
Phone : (407)898-1757
Fax Number : (407)897-5336

2019 APR -9 AM 10:24
APPROVED AND FILED

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: INFO@ABKCORP.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LOZANO'S HOMES LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

2019 APR -9 PM 12:51

Electronic Filing Menu

Corporate Filing Menu

Help

T.G.
04/10/19

H 19 000 1168 79 3

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LOZANO'S 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:

STEPHANIE CASTRO

Name of Person

ACCOUNT BOOKKEEPING CORP

Firm/Company

5301 CONROY RD, STE 140

Address

ORLANDO, FL, 32811

City/State and Zip Code

CONTROL@ABKCORP.COM

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

2019 APR - 9 AM 10: 21
 APPROVED
 AND
 FILED

For further information concerning this matter, please call:

STEPHANIE CASTRO at (407) 898-1757

Name of Person 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

H 19 000 1168 79 3

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

LOZANO'S 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 03/22/2019 and assigned Florida document number L19000080214.

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 contain the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8977 CALIFORNIA PALM ROAD
KISSIMMEE, FL 34747

2019 APR -9 11:10:24
FILED
AND
APPROVED

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:

8977 CALIFORNIA PALM ROAD
Enter Florida street address
KISSIMMEE, Florida 34747
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

419000116879 3

If anending 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>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change

2019 APR -9 AM 10:24

APPROVED
AND
FILED

4190001168793

H 19 000 11 68 79 3

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

Multiple horizontal lines for amending information.

2019 APR - 9 AM 10:24
SECRETARY OF STATE
FILED
APPROVED AND FILED

E. Effective date, if other than the date of filing: _____ (optional)
If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing. Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated: April 08, 2019

Signature of a member or authorized representative of a member
EVANDRO LUIZ LOZANO
Typed or printed name of signer

H 19 000 11 68 79 3