LU000037559

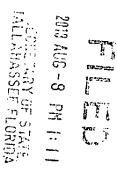
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COVER LETTER.

TO:

Registration Section
Division of Corporations

HOMESTART PROPERTIES LLC

SUBJECT:

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:

JULIO SALDARRIAGA

Name of Person

HOMESTART PROPERTIES LLC

Firm/Company

175 SW 7TH ST SUITE 2020

Address

MIAMI FL 33130

City/State and Zip Code

avelez@midtown-realty.com

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

For further information concerning this matter, please call:

ALEJANDRO VELEZ

305 9611115

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HOMESTART PROPERTIES 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 C Florida document number L11000037559	Company were filed on <u>3/29/2011</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and end with the wor "L.L.C."	rds "Limited Liability Company," the desi	gnation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		201
(Principal office address MUST BE A STREET ADDR	<u> </u>	
		्राप्ता प्राप्ता का स्थापन का स्थापन का स्थापन का
Enter new mailing address, if applicable:		A R M
(Mailing address MAY BE A POST OFFICE BOX)		23
B. If amending the registered agent and/or registered agent and/or the new registered office add		s, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida .	street address
		lorida
	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 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>	Name	Address	Type of Action
MGR	ALEJANDRO VELEZ	2101 BRICKELL AVE 1110	Add
		MIAMI FL 33129	Remove
			-
	·		Add
			Remove
			Add
			Remove
		HASS	00
		LORIDA	Add
			Add
		···	Remove
			_
			Add
			Remove

••	
A. 15. 16	2 ma 2012 / 1/1/1/1
FIUSVOT	2nd, 2013.
	Signature of a member or authorized representative of a member
	Signature of a member or authorized Africantative of a member ALEDANDRO VELEZ Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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