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| (Re | questor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
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SECRETARY OF STATE

COVER LETTER

| TO: Registration S Division of Co | ection orporations | | | | | |
|--------------------------------------|--|---|---------------------------------------|-------------|-----------|---|
| | Home Management LLC | | | | | |
| 30bJEC1 | Name of Lim | ited Liability Company | , | | | |
| The enclosed Articles o | f Amendment and fee(s) are sub | mitted for filing. | | | | |
| Please return all corresp | ondence concerning this matter | to the following: | | | | |
| | Evan Chait | | | | | |
| | | Name of Person | | | | |
| | Attorney at law | | | | | |
| | | Firm/Company | | IALI SEC | 6 | |
| | | | | • | | |
| | | Address | | SSS | 5 | ĺ |
| | La Crescenta, CA 91214 | | | | | (|
| | | City/State and Zip Code | | | 84 OI IIA | |
| | echait@catalinastructuredfu | _ | | 35-771 | ထ် | |
| | E-mail address: (| to be used for future annual report notif | cation) | | | |
| For further information | concerning this matter, please c | all: | | | | |
| Evan Chait | | 800 449-6311 | | | | |
| Name | of Person | at () 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) | ertified Copy Certificate of Status & | | | |
| | LING ADDRESS: | STREET/COURIL | | | | |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Silverlake Home Management LLC | | |
|---|---|------------------------|
| (<u>Name of the Limited Liability Com</u> (A Florida Limite | npany as it now appears on our records.) ed Liability Company) | |
| The Articles of Organization for this Limited Liability Company were filed on 3/29/2016 | | and assigned |
| Florida document number L16000062974 | | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited li | ability company here: | |
| 5446 Douglas St LLC | | |
| The new name must be distinguishable and contain the words "Limited Lie | ability Company," the designation "LLC" or the | abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADDRESS) | | |
| | | 全的 量 市 |
| | | Sa _ = |
| Enter new mailing address, if applicable: | | |
| | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| | | <u> </u> |
| B. If amending the registered agent and/or registered registered agent and/or the new registered office address h | | er the name of the new |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Enter Florida street address | |
| | , Florida | |
| | City | Zip Code |
| New Registered Agent's Signature, if changing Registered Agen | nt: | |

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 Type of Action **Address Title** <u>Name</u> _□ Add _□ Remove _□ Change _D Add _□ Remove _□ Change _□ Add □ Remove SE Change TANSSEL FLOOR _□ Change □ Add ☐ Remove _□ Change _□ Add □ Remove

_□ Change

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| Effective date, if ot If an effective date is list Note: If the date inso document's effective | erted in this block | specific and can does not meet | the applicabl | date of filing or e statutory fili | more than 90 da ng requiremen | (optional) ys after filing. nts, this date |) Pursuant will not b | to 605. pe liste | .0207 ed as |
| he record specifie The 90th day a | | | e, but not a | n effective | time, at 12 | 2:01 a.m. | on the | earlie | er of |
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| Dated June 13 |) (] | , | | • | | | | | |

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