## L180000357833

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. •	COVI	ER LETTER	
TO: Registration Division of C			
	anager LLC		
SUBJECT:	Name of Limited Liab	ility Company	
The enclosed Articles of	of Amendment and fee(s) are submitted for	or filing.	
Please return all corres	pondence concerning this matter to the fo	llowing:	
	Edward Hibshman		
1	Na	ame of Person	
i	Better Way Homes LLC		
	Fi	im/Company	
	1000 NW North River DR #111		202 SE
		Address	
	Miami, FL 33136		2021 MAR -9 PM 3: 11 SECS STATISTICS STATIST
	·	tate and Zip Code	30 <b>2</b>
	ehibshman@betterwayhomes.com E-mail address: (to be user	I for future annual report notifies	tion)
For further information	concerning this matter, please call:	•	74 = 1
	a	ıt ()	
!Name	of Person	Area Code Daytime T	elephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	Certificate of Status C	5.00 Filing Fee & Certified Copy dditional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addr Registration Division of P.O. Box 63 Tallahassee,	Section Corporations 327	Street Address: Registration Secti Division of Corpo The Centre of Tal 2415 N. Monroe S Tallahassee, FL 3	orations lahassee Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

b w ri Manager LLC	
(Name of the Limited Liability Company as it now appears on our (A Florida Limited Liability Company)	records.)
, , , , , , , , , , , , , , , , , , , ,	
The Articles of Organization for this Limited Liability Company were filed on 11/02/2018	and assigned
Florida document number L18000257833	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
BWH Realty LLC	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation	"L.I.C" or the abbreviation "L.IC."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	202
i	7
	9
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	PA :
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:	
- Tame of New Adjuncted Figure	
New Registered Office Address:	
Enter Florida street	address
	_, Florida
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 fourth on anymou to anymout with the
provisions of all statutes relative to the proper and complete performance of my duti	es and Lam 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 confil	m 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 = Mar AMBR = Aut	nager Horized Member		
Title	<u>Name</u>	Address	Type of Action
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			□Remove
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an effective date is listed, ote: If the date inserte	r than the date of filing: the date must be specific and can ed in this block does not meet te on the Department of State	not be prior to date of filing or the applicable statutory fili	(optionore than 90 days after ng requirements, this	filing.) Pursuant to 605,0201
record specifies a delay is filed.	yed effective date, but not an e	effective time, at 12:01 a.m	on the earlier of: (b	) The 90th day after the
ated March 3	MANA MARIA	021	r of a member	
Edward Hibs		see so audionized representativ	C OF THE INCHIOCI	
Edward Hibe	hman			

Filing Fee: \$25.00