

2017 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M13000003161

Entity Name: AMH PORTFOLIO A, LLC**Current Principal Place of Business:**30601 AGOURA ROAD
SUITE 200L
AGOURA HILLS, CA 91301**Current Mailing Address:**30601 AGOURA ROAD
SUITE 200L
AGOURA HILLS, CA 91301 US**FEI Number:** 27-4267387**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MEMBER
Name AMERICAN HOMES 4 RENT, LP
Address 30601 AGOURA ROAD
SUITE 200L
City-State-Zip: AGOURA HILLS CA 91301

Title CEO
Name SINGELYN, DAVID P
Address 30601 AGOURA ROAD
SUITE 200L
City-State-Zip: AGOURA HILLS CA 91301

Title VICE PRESIDENT - PROPERTY
OPERATIONS
Name REITER, JOSHUA
Address 30601 AGOURA ROAD
SUITE 200L
City-State-Zip: AGOURA HILLS CA 91301

Title SENIOR VICE PRESIDENT -
PROPERTY OPERATIONS
Name PALMER, WAYNE LINCOLN
Address 30601 AGOURA ROAD
SUITE 200L
City-State-Zip: AGOURA HILLS CA 91301

Title CHIEF LEGAL OFFICER
Name VOGT-LOWELL, SARA
Address 30601 AGOURA ROAD
SUITE 200L
City-State-Zip: AGOURA HILLS CA 91301

Title ASSISTANT VICE PRESIDENT -
MAINTENANCE
Name TIPTON-RASMUSSEN, ALAINA
Address 30601 AGOURA ROAD
SUITE 200L
City-State-Zip: AGOURA HILLS CA 91301

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SARA VOGT-LOWELL**CHIEF LEGAL OFFICER****12/14/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date