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| Special Instructions to F | iling Officer: | |
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Office Use Only

G. MCLEOD

EXAMINER



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FILED SECRETARY OF STATE CORPORATION

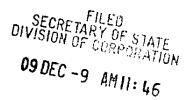
· COVER LETTER

Registration Section Division of Corporations

TO:

| SUBJECT: | | PRIDE HOMES OF PEACHTREE, LLC | | | | |
|--|-------------|--|--------------------------------------|----------------------------------|-------------|--|
| | | Name of Limited Liability Company | | | | |
| | | | | | | |
| The enclosed Ar | ticles of A | mendment and fee(s) are su | bmitted for filing | | | |
| Please return all | correspond | dence concerning this matter | r to the following | : | | |
| | | | | | | |
| | | | Martha Ferr | | | |
| | | | Name of Po | erson | | |
| | | PRIDE H | OMES OF PI | | E, LLC | |
| | | | Firm/Com | pany | | |
| | | 12448 S. W. 127th Avenue | | | | |
| | Address | | | | | |
| | | | Miami, FL | 33186 | | |
| | | | City/State and 2 | Zip Code | | |
| | | martha@garco.net E-mail address: (to be used for future annual report notification) | | | | |
| For further infor | mation cor | ocerning this matter, please of | | | | ··· / |
| · | mation con | teerning this matter, prease t | | | | |
| | | . Kupfer, Esq | at (<u>95</u> | 1 | | 00 ext 209 ephone Number |
| | Name of F | 'erson | i | Area Code & Da | lytime i ei | epnone Number |
| | 1.6.4 | 0.11 | | | | |
| | | following amount: | | | | |
| \$25.00 Filing | ; Fee | \$30.00 Filing Fee & Certificate of Status | S55.00 Fil Certified (addition | | osed) | Sectificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed) |
| | | | | | | |
| MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 | | | STREET/CO | URIER A | ADDRESS: | |
| | | | Registration So Division of Co | | n¢ | |
| | | | Clifton Buildir | ng | | |
| | Fallahass | ee, FL 32314 | | 2661 Executiv Tallahassee, Fl | | Circie |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



| PRIDE HOME | ES OF PEACHTREE | , LLC |
|--|---|--|
| (<u>Name of the Limited Liabili</u> (A Florida | a Limited Liability Company) | rs on our records.) |
| The Articles of Organization for this Limited Liability | Company were filed on | January 30, 2004 and assigned |
| Florida document numberL0400008408 | <u></u> . | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the lir | mited liability company her | <u>e</u> : |
| The new name must be distinguishable and end with the we "L.L.C." | ords "Limited Liability Compa | ny," the designation "LLC" or the abbreviation |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADD | DRESS) | |
| Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| B. If amending the registered agent and/or registered agent and/or the new registered office ade | stered office address on o dress here: | our records, enter the name of the new |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| | Eni | er 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 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 Changing Registered Agent, Signature of New Registered Agent

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> | <u>Name</u> | Address | Type of Action |
|---------------|---|--|------------------------|
| MGR | Carlos M. Garcia | 12448 S.W. 127th Avenue Miami, FL 33186 | Add Remove |
| MGR | Natasha Andrade | 12448 S.W. 127th Avenue Miami, FL 33186 | Add Remove |
| | | | Add Remove |
| | | | Add Remove |
| | | | _∐Add _∏Remove - |
| | | | Add Remove |
| D. If amendin | g any other information, enter change(s |) here: (Attach additional sheets, if necessary.) | |
| | | | - - |
| | | | · - , - • |
| Dated | November 20 , 2009 | 1/2 | · |
| _ | Hall Fin | authorized representative of a member printed name of signee | |

Page 2 of 2

Filing Fee: \$25.00