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SECRETARY OF SIATEN OF CORPORATION

AUG - 1 2013

T. HAMPTON

# **COVER LETTER**

TO: Registration Sec Division of Corp		·	
SUBJECT:	D Mestead Name of Limit	Family Hoted Liability Company	1 dings, UC
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Ma	nia Ramos Name of Person	
	Ramos	Investment Firm/Company	ts, LLC
		T, W. 117 Ave,	nue
	Miam	1, FL 33186	·
	E-mail address: (to	City/State and Zip Code  Mos 29050  o be used for future annual report notification	gmail, com
For further information co	oncerning this matter, please ca	ail:	
Marie of	Ramos Person	at <u>786</u> , <u>25/-26</u> Area Code & Daytime To	110 Elephone Number
Enclosed is a check for th	e following amount:		
\$25.00 Filing Fee	□\$30.00 Filing Fec & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee, Certificate of Status & Certified Copy

### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

### STREET/COURIER ADDRESS:

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Homestead F	Emily Holdin	as, LLC
(Name of the Limited Liabi	ility Company as it now appears on da Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liabilit Florida document number 4040007	ty Company were filed on <u>Mar</u> 22886	rch 7, 2012 and assigned File of Control of
This amendment is submitted to amend the following	g:	# ~~~ Page 
A. If amending name, enter the new name of the l	limited liability company here:	11: 38
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company,"	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DDRESS)	
Enter new mailing address, if applicable:	<del></del>	
(Mailing address MAY BE A POST OFFICE BOX		
B. If amending the registered agent and/or re		records, enter the name of the new
registered agent and/or the new registered office a		
Name of New Registered Agent:	Maria Ro	amos
New Registered Office Address:	Enter F	Florida street address
	Line, 1	
	City	, Florida 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 **Type of Action** MGR Maria Ramos 110115.W. 117 Auc. Add

Miami, FC 33186 Remove **Address** Title Remove Remove Remove Remove Remove

D. If a	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated _	Ach, 29 , 2013.
	Cherry Cherry
	Signature of a member or authorized representative of a member
	Maria Ramos
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

DIVISION OF CORPOLIATIONS