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B. KOHR
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EXAMINER

10 OCT 12 PM IS SE

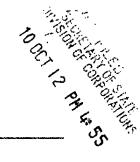
COVER LETTER

'Registration Section

TO:

Division of Co	orporations				
	Casa Latino R	tealty of Deltona, LLC	6		
SUBJECT:		ited Liability Company			
			72		
			3		
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.	F.		
Please return all corresp	pondence concerning this matter	r to the following:	10 OCT 12 PM 18: 35		
		Juan Santa Cruz			
	Name of Person				
	Casa Latino Realty of Deltona, LLC				
	Firm/Company				
	517 Deltona Blvd				
		Address			
		Deltona, Fl 32725			
		City/State and Zip Code			
	i	santacruz@cfl.rr.com			
	E-mail address:	to be used for future annual report notifi-	cation)		
For further information	concerning this matter, please	call:			
t	Sto C	000	F7F 0000		
	an Santa Cruz	at (386) Area Code & Daytime	575-0006		
714110	OI I VISOII	rava ood a Dayana	Totophotic Hamber		
Parlandia albert Par	de Collection and				
Enclosed is a check for	_				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)			
			(additional copy is enclosed)		
	LING ADDRESS:	STREET/COURI			
Registration Section Division of Corporations		Registration Section Division of Corpora			
P.O. 1	Box 6327	Clifton Building			
rana	hassee, FL 32314	2661 Executive Cer Tallahassee, FL 323			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Casa La	tino Realty of Deltona,	LLC	*********************************
(Name of the Limited L (A F	ability Company as it now appea orida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liab	ility Company were filed on	12/12/2006	and assigned
Florida document numberL060001184			
This amendment is submitted to amend the follow	ing:		
A. If amending name, enter the new name of the	<u>ie limited liability company he</u>	<u>re</u> :	
America	an Home Realty Group, LL	С	
The new name must be distinguishable and end with t "L.L.C."	he words "Limited Liability Comp	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicab	le:		
(Principal office address MUST BE A STREET.	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO	<u></u>		
	***************************************	· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or registered agent and/or the new registered offic		our records, <u>enter t</u>	he name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	E	nter Florida street addi	ress
		, 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action	
	A-44		Add ☐ Remove	
			Kemove	
			Add Remove	
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	<u> </u>		Add Remove	
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**************************************			Add Remove	
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D. If amen	ding any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)		
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		_	u	
Dated		110.		
	すり	or authorized representative of a member		
		uan Santa Cruz		

Page 2 of 2

Filing Fee: \$25.00