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SECRETARY OF STATE



COVER LETTER.

TO: Registration Se Division of Cor	ection porations		
SUBJECT: Homes	tead Real Estate Inv (Name of Limi	estment, LLC ted Liability Company)	
•			
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	•		
	Chrysian Garcia		
		(Name of Person)	
	Homestead Real Estate I	nvestment, LLC	DB JUH 27 AM 5. G FECKTIVE OF STATE TALLAMISSEE FLOAD
	· · ·	(Firm/Company)	
	501 SW 56 Ave		
		(Address)	The second
	Margate FL 33068		
		(City/State and Zip Code)	ア
For further information of	concerning this matter, please ca	all:	
Chrysian Garcia		at (954) 871-3501	
	of Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Homestead Real Estate Investment, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 07/16/2007 and assigned Florida document number L07000073037 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the apprevia "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: (Enter Florida street address)

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)

MGR = Manager MGRM = Managing Member					
<u>Title</u>	<u>Name</u>	Address	Type of Action		
MGR	Ernesto Garcia	2912 Tarpon Drive Miramar FL 33023	Add Remove		
			Add Remove		
	White the second		Add Remove		
			Action Control		
			Add OF Remove Age 9: 50 Remove Age 10 September 10 Septem		
			Add Remove		
D. If ame	nding any other information, ent	ter change(s) here: (Attach additional sheets, if nece.	ssary.)		
-					
- -					
Dated					
		a member or authorized representative of a member	 		
	Chrysian Garci	Turned or printed name of signer			

Page 2 of 2

Filing Fee: \$25.00