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### **COVER LETTER**

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		stration Secti sion of Corpo					
eun iez		Associated Ho	ome Solutions Realty				
SUBJEC	.1: ,	_					
The encle	osed	Articles of Ar	mendment and fee(s) are sub	mitted for filing.			
Please ret	turn	all correspond	ence concerning this matter	to the following:			
			Wendy Wilson				
				Name of Person	-	_	
			Associated Home Solution.	s Realty			
				Firm/Company	·	_	
			3975 20th St., Suite E				
	Address						
			Vero Beach, FL 32960				
			directoroffinance@associate	 15	SIANU.		
			2	92 22 23			
For furth	er in	formation con	cerning this matter, please ca	all:		?; ∷	OF STATE
Robin Vo	otaw	,		772 234-1	111		DE CENT
		Name of P	erson	Area Code	Daytime Telephone Numbe	e. £:	STATE
Enclosed	l is a	check for the	following amount:				ဟ
\$25.0	00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	ed) Certifie	ate of Status &	

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

## ASSOCIATED HOME SOLUTIONS REALTY (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 $\frac{1-18-08}{1}$ and assigned Florida document number \_\_\_\_\_L08000006673 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 3975 20th St., Suite E Enter new principal offices address, if applicable: Vero Beach, FL 32960 (Principal office address MUST BE A STREET ADDRESS) 3975 20th St., Suite E Enter new mailing address, if applicable: Vero Beach, FL 32960 (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 registered agent and/or the new registered office address here: Name of New Registered Agent: 3975 20th St., Suite E New Registered Office Address: Enter Florida street address Vero Beach \_, Florida <u><sup>32960</sup></u>

#### 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 605, 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.

Cuv

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Wendy Wilson		□ Add
			□ Remove
		3975 20th St., Suite E Vero Beach, FL 32960	E Change
		<del></del>	Add
			□ Remove
			Change
			Add
			Remove
			Change
		-	Remove
			Change
<del></del>			Add
			☐ Remove
			Change
		<del></del>	□ Remove
			☐ Change

_			
<u>-</u>			
			<del></del>
ate of filing:	erior to date of filing or me	(optional)	reusint to 605 070
k does not meet the ap	plicable statutory filing	requirements, this date wil	not be listed a
	not an effective ti	me, at 12:01 a.m. on	the earlier o
2019			
	k does not meet the appartment of State's reco effective date, but d is filed.	k does not meet the applicable statutory filing artment of State's records.  effective date, but not an effective ti	effective date, but not an effective time, at 12:01 a.m. on d is filed.

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Typed or printed name of signee

Filing Fee: \$25.00