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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

MAR 23 2011

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: House2home Properties, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael J. Bielon

Name of Person

Goldcoast Capital Corporation

Firm/Company

12157 W. Linebaugh Ave., #350

Address

Tampa, FL 33626

City/State and Zip Code

mike@ontimerents.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Bielon

Name of Person

at (813)

703-1400

Area Code & Daytime Telephone Number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Enclosed is a check for the 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

House2home Properties, LLC

Page 1 of 2

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>	<u>Address</u>	<u>Type of Action</u>
MGRM	Michael J. Bielon	12157 W. Linebaugh Ave. #350 Tampa, FL 33626	☐ Add ☒ Remove
MGRM	Goldcoast Capital Corp.	12157 W. Linebaugh Ave. #350 Tampa, FL 33626	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated March 16, 2011

[Signature]
Signature of a member or authorized representative of a member

MICHAEL BIELON
Typed or printed name of signee

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SECRETARY OF STATE
ALLAHASSEE FLORIDA