Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:				
	Division of Corporations			
	Fax Number : (850)617-6383			
From:		(2)	2	
	Account Name : SMALL BUSINESS RESOURCES USA, INC.	=450	2018	
	Account Number : 120040000173	<u>- ≥</u> 5.	8	
	Phone : (407)298-4646	- 34	3	
	Fax Number : (407)297-0588		$\dashv$	
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			9	
	**Enter the email address for this business entity to be used for futur	6 (V		
	annual report mailings. Enter only one email address please. **	COC CD TI	<b>?</b>	
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	Email Address:	: 'W	بې	

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN UPTREND HOMES, LLC

Certificate of Status	1
Certified Copy	0
Page Count	91
Estimated Charge	\$30.00

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Solution 

Electronic Filing Menu Corporate Filing Menu Help

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FAX AUDIT # H18 000 311 920 3

## **COVER LETTER**

TO:	Registration Sec Division of Corp			
CYTD YE	Uptrend Hor	mes, LLC		
SUBJE	C):	Name of Limit	ed Liability Company	
The end	closed Articles of A	Amendment and fee(s) are subn	nitted for filing.	
Please r	etum all correspo	ndence concerning this matter t	o the following:	
		James K. Duerr, CPA		
			Name of Person	
		Small Business Resources U	JSA, Inc.	
			Firm/Company	
		1601 Park Center Dr., Ste.	6 <u>.</u> A	
			Address	
		Orlando, FL 32835		
			City/State and Zip Code	
		JimD@sbrorlando.com  E-mail address: (1	o be used for future unnual report	notification)
For fur	ther information c	oncerning this matter, please ca		
James	К. Диетт, СРА		407 298-464	6
	Name o	f Person	Area Code Da	sytime Telephone Number
		Caller Name was to		
		the following amount:	☐ \$55.00 Filing Fee &	□ \$60.00 Filing Fee,
F 25.	5.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	Certified Copy  (additional copy is enclosed)	Certificate of Status &
		ING ADDRESS:		URIER ADDRESS:
		ration Section on of Corporations	Registration S Division of C	orporations
	P.O. B	ox 6327 assee, FL 32314	Clifton Buildi 2661 Executiv	ng ve Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

FAX AUDIT # # 18000311930 3

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Uptrend Homes, LLC		70 TO 1
(Name of the Limited Liability Con (A Florida Limit	npany as it now appears on our records.) ed Liability Company)	AS THE
The Articles of Organization for this Limited Liability Compa	my were filed on09/26/2008	mand assigned U
Florida document number L08000092144		严 2
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	iability company here:	
Thomas Rumpb, LLC		
The new name must be distinguishable and contain the words "Limited L	iability Company." the designation "LLC" or	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	<del></del>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	l office address on our records, here:	enter the name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Flori	ida
<del></del>	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 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.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

10/29/2018 12:22PM 4072970588

SBR USA Inc.

FAX Duom # H18000311920 3

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>	Name	<u>Address</u>	Type of Action
AMBR	Joan T. Rumph	13506 Summerport Village Parkwa	
		Suite 718	■ Remove
		Windermere FL 34786	Change
			Remove
			□ Change
			D Add
			□ Remove
		·	Change
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Page 2 of 3

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October 25	2018		
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7 mm 40	ure of a member or authorized representative of a r	pember(f)	2018
. Signar		2	308
Thomas H. Rumph, AMBR		<u></u>	
	Typed or printed name of signee	آن موت	~