

**LD8000110399**

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(Requestor's Name)

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(Address)

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(City/State/Zip/Phone #)

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PICK-UP

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\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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DIVISION OF CORPORATIONS  
11 FEB 16 AM 11:43

N. Culligan FEB 17 2011

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Central Florida Housing Solutions, 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:

Reggie Wallace

Name of Person

Central Florida Housing Solutions, LLC

Firm/Company

106 NW 10th Drive

Address

Mulberry, FL 33860

City/State and Zip Code

reggie.wallace@verizon.net

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

For further information concerning this matter, please call:

Reggie Wallace

Name of Person

at ( 863 ) 529-3725

Area Code & Daytime Telephone Number

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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

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11 FEB 16 AM 11:43

Central Florida Housing Solutions, 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 12/01/08 and assigned  
Florida document number L08000110399.

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 abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

106 NW 10th Drive

**(Principal office address MUST BE A STREET ADDRESS)**

Mulberry, FL 33860

**Enter new mailing address, if applicable:**

106 NW 10th Drive

**(Mailing address MAY BE A POST OFFICE BOX)**

Mulberry, FL 33860

**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:

Reggie Wallace

New Registered Office Address:

106 NW 10th Drive

*Enter Florida street address*

Mulberry

, Florida

33860

*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.*

Reggie Wallace

If Changing Registered Agent, Signature of New Registered Agent

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	Richard Smith	3232 Teneroc Mine Road Lakeland, FL 33805	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Reggie Wallace	106 NW 10th Drive Mulberry, FL 33860	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated January 31, 2011

Signature of a member or authorized representative of a member

Stephen K. Brooks

Typed or printed name of signee

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