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## Florida Department of State

Division of Corporations Public Access System

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(((H09000045446 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CSH SERVICES, LLC

Account Number : I20070000160

: (803)494-3124

Fax Number : (561) 455-9885



## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

HOME BUYERS 2, LLC



Certificate of Status	. 0
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Corporate Filing Menu

J. BRYAN

FEB 27 2009

**EXAMINER** 

## ARTICLES OF AMENDMENT # 09000045446 3 ARTICLES OF ORGANIZATION **OF**

HOME BUYERS 2, LLC			
(Name of the Limited Liability Compar (A Florida Limited L	y as it now appears on our records.) lability Company)		
The Articles of Organization for this Limited Liability Company	were filed on 01/27/2009	and assigned	
Florida document number L09000008386	•		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and end with the words "Limit" L.L.C."	ted Liability Company," the designation "LL	C" or the abbreviation	
Enter new principal offices address, if applicable:	•		
(Principal office address MUST BE A STREET ADDRESS)		HAS P	
		SSE 6	
•			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
		<u> </u>	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		-	
Name of New Registered Agent:		<del></del>	
New Registered Office Address:	Ass. unball a l	<del></del>	
	(Enter Florida street address)		
	, Florida		
	(Cltv)	(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.

(If Changing Registered Agent, Signature of New Registered Agent)

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# 09000045446.3

MGR = Ma MGRM = I	anager Managing Member	# 090000	045446-3
<u>Title</u>	Name	Address	Type of Action
MGRM	SALTWATER CAPITAL LLC	18750 OAK LEAF LANE NORTHVILLE, MICHIGAN 48168-3045	Add Remove .
			Add Remove
*****			Add Remove
			Add Remove
<u></u>			Add Remove
<del></del>			[_] Add Remove
  		ange(s) here: (Attach additional sheets, if necessary.) .	09 FEB 26 AM 8: 15 SECRETARY OF STATE TALLAHASSEE. FLORIDA
Dated FEBF	RUARY 23	n hote mak.	<b>5</b>
	•	ber or authorized representative of a member	
	ELIZABETH A MAKI	ped or printed name of signee	<del></del>

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