## 109000047632

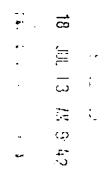
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JUL 2 1 2018

S. PRATHER

## **COVER LETTER**

SUBJECT:	Cape H	Homes LLC	
NOBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Manuel Gonzalez		
		Name of Person	
		Firm/Company	<del></del>
	18011 S Tamiami Trl, S	te 16-99F	
		Address	
	Fort Myers FL 3390	8	
	mannygrealtor@aol.cor	City/State and Zip Code n	
	E-mail address: (	to be used for future annual report notific	cation)
For further information	concerning this matter, please ca	all:	
Manuel Gonzalez		239 707-7967	
Name	of Person	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** 

TO:

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

Cape Homes, LLC		
( <u>Name of the Limited I</u> (A l	.iability Company as it now appears on our records.) Florida Limited Liability Company)	
Ų.	,	
he Articles of Organization for this Limited Liabi	lity Company were filed on May 15th, 2009	and assigned
lorida document numberL09000047632	·	. 25
his amendment is submitted to amend the following		( 
. If amending name, enter the new name of the	e limited liability company here:	-2
California Stayz LLC	<del>-</del> · · · · · · ·	73
ne new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or the	e abbreviation "L'L.C."
-	•	. 5
nter new principal offices address, if applicable	e:	
<u>Principal office address MUST BE A STREET A</u>	(DDRESS)	
nter new mailing address, if applicable:		
<u> Aailing address MAY BE A POST OFFICE BO</u>	<u></u>	
		<del>_</del>
	registered office address on our records, ent	<u>er the name of the</u>
gistered agent and/or the new registered office	<u>: address here</u> :	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
<del>-</del>	City	Zin 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

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
MGRM	Manuel Gonzalez	18011 S Tamiami Trl, Ste 16-99	<b>■</b> Add
		Fort Myers FL 33908	□ Remove
		<del> </del>	Change
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Add
			Remove
			Change
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	st be specific and cannot be prior to date of filing or more than 90 ock does not meet the applicable statutory filing requirer	
ecord specifies a delayed e 90th day after the rec	d effective date, but not an effective time, at ord is filed.	12:01 a.m. on the earlie
July 2nd	2018	
	m cf	<u> </u>
	Signature of a member or authorized representative of a memb	
		, · · · · · · · · · · · · · · · · · · ·
	Manuel Gonzalez	ω .~
	Manuel Gonzalez Typed or printed name of signee	ω <u>σ</u>

Page 3 of 3

Filing Fee: \$25.00